

PARTICIPATING EMPLOYEE APPLICATION FORM
WSQ Place and Train (PnT) PR Apprenticeship Programme
(For Singapore Citizens and Permanent Residents Only)

Please submit the completed form attached with a detailed resume/CV and a photocopy of your NRIC (both front and back). Forms can be submitted by:

Fax: 6534 4691

Email: admin@iprs.org.sg

Mail: Institute of Public Relations of Singapore, 43B South Bridge Road Singapore 058677.

Note: All sections in this form must be filled in.

All information submitted will be kept confidential and be used for administrative purposes only.

1. PERSONAL PARTICULARS		
Salutations: _____ <i>(e.g Mr, Miss ,Mrs, Ms, Dr etc)</i>	Name in Full: _____ <i>(As it appears in your NRIC/Passport. Please underline Surname)</i>	
NRIC: _____	Citizenship: _____	Date of Birth: _____ <i>(dd/mm/yyyy)</i>
Gender: * M / F	National Service (for males): <input type="checkbox"/> Completed <input type="checkbox"/> Not Completed <input type="checkbox"/> N/A	
Mailing Address: _____ _____ Postal Code ()		
Contact Details: _____ (Mobile) _____ (Home) _____ (Office)		
Email Address: _____		

2. EDUCATIONAL QUALIFICATIONS DETAILS	
<input type="checkbox"/> Masters & above	<input type="checkbox"/> 'A' Level
<input type="checkbox"/> Degree	<input type="checkbox"/> 'O' Level
<input type="checkbox"/> Diploma	<input type="checkbox"/> Others, please specify: _____

3. LANGUAGE PROFICIENCY - Please rate on a scale of 1 (Poor) to 10 (Excellent)

	Written	Spoken
English		

4. APPLICATION CATEGORY

- Fresh Entrants Skills Upgrader

Note: For Fresh Entrants, kindly skip Section 5 of the application form.

5. EMPLOYMENT DETAILS

(Kindly attach a detailed CV to be submitted along with this application form.)

Are you currently employed: * Yes / No

Years at Current Employer: _____

Years of Working Experience: _____

Name of Current Employer: _____

Address: _____

Designation: _____

Job Scope: _____

Tel: _____ Fax: _____ Email: _____

6. ADDITIONAL INFORMATION

Special Needs:

- Loss of Hearing
 Loss of Eyesight
 Others

Please specify: _____

Dietary Requirements:

- Halal
 Vegetarian
 Kosher

Others
Please specify: _____

7. DISCLAIMER

I hereby declare that:-

- I. All particulars given in this Application Form are true and complete to the best of my knowledge and given of my own free will. I expressly authorize Institute of Public Relations of Singapore (IPRS) to provide any information disclosed in this application to Singapore Workforce Development Agency (WDA) for the purpose of the WSQ Place and Train (PnT) PR Apprenticeship Programme.
- II. I understand that providing false information to the Institute of Public Relations of Singapore (IPRS) and Singapore Workforce Development Agency (WDA) is illegal and punishable by law under the Oaths and Declarations Act 2000.
- III. I am not an undischarged bankrupt.
- IV. I do not possess any criminal records with the exception of minor traffic offences.
- V. I agree to be bonded for the seven-month duration of the WSQ Place and Train (PnT) PR Apprenticeship Programme and for seven months upon completion of the programme.
- VI. I have completed all existing industry bonds or served the Minimum Service Period (MSP) with my current employer/organisation/association/authority before enrolling in the WSQ Place and Train (PnT) PR Apprenticeship Programme.
- VII. I am a Singapore Citizen; or I am a Singapore Permanent Resident.

Acknowledged and Accepted by:

Signature of Applicant

Date

8. SURVEY

a) Where did you hear about Creative Industries Apprenticeship Scheme (CIAS) for PR Executives?

(Note: You may tick more than one box.)

- WDA's website
- IPRS' website
- Creative Industries (CI) Fair organised by WDA
- Word-of-Mouth (*E.g. Friends, Co-workers etc.*)
- Others, please specify: _____

b) Reasons for joining the programme.
