

**PROGRAMME APPLICATION FORM**

*Confidentiality: INFORMATICS ACADEMY is committed to maintaining the confidentiality of the applicant's personal information and undertakes not to divulge any of the applicant's personal information to a third party without prior written consent.*

Programme Applied For: \_\_\_\_\_

Other Programme(s) of Interest: \_\_\_\_\_

Intake Date: \_\_\_\_\_ Mode of Study:  Full Time  Part Time**1) PERSONAL PARTICULARS****SECTION A: PERSONAL DETAILS**

Full Name (as in NRIC/Passport): \_\_\_\_\_

NRIC/Passport No.: \_\_\_\_\_ Date of Expiry (DD/MM/YYYY): \_\_\_\_\_ Place of Issue: \_\_\_\_\_

FIN No.: \_\_\_\_\_ B/Cert No.: \_\_\_\_\_ Date of Birth (DD/MM/YYYY): \_\_\_\_\_

Nationality: \_\_\_\_\_ Race: \_\_\_\_\_ Religion: \_\_\_\_\_ Age: \_\_\_\_\_ Gender:  Male  FemaleMarital Status:  Single  Married City/Country of Residence: \_\_\_\_\_ Current Occupation (if any): \_\_\_\_\_**SECTION B: PARENT/GUARDIAN DETAILS (if applicant is under 18 years of age)**

Name of Parent/Guardian: \_\_\_\_\_

NRIC/Passport No.: \_\_\_\_\_ Nationality: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. (Country &amp; Area Code): \_\_\_\_\_ Mobile No. (Country &amp; Area Code): \_\_\_\_\_

**SECTION C: ADDRESS IN HOME COUNTRY**

Address: \_\_\_\_\_

\_\_\_\_\_ Email Address: \_\_\_\_\_

Telephone No. (Country &amp; Area Code): \_\_\_\_\_ Mobile No. (Country &amp; Area Code): \_\_\_\_\_

**Emergency Contact Details:**

Name: \_\_\_\_\_ Telephone No./Mobile No. (Country &amp; Area Code): \_\_\_\_\_

**SECTION D: ADDRESS IN SINGAPORE**

Address: \_\_\_\_\_

\_\_\_\_\_ Email Address: \_\_\_\_\_

Telephone No. (+65): \_\_\_\_\_ Mobile No. (+65): \_\_\_\_\_

**SECTION E: EDUCATION BACKGROUND**

Name of Institution/School (in chronological order)	Country	Language of Instruction	Period of Study		Qualification Obtained	Education Certificate No.
			From (dd/mm/yyyy)	To (dd/mm/yyyy)		

**SECTION F: EMPLOYMENT HISTORY**

Company Name	Country	Period of Working		Designation	Nature of Duties
		From (dd/mm/yyyy)	To (dd/mm/yyyy)		

**SECTION G: LIST OF COUNTRIES (which the applicant has resided in for 1 year or more in the last 5 years)**

Country	Address	Period of Stay	
		From (dd/mm/yyyy)	To (dd/mm/yyyy)

**SECTION H: DOCUMENTATION CHECKLIST (Please tick  where applicable)**

NRIC/Passport No./Birth Certificate	<input type="checkbox"/>	Bank Statement (if applicable)	<input type="checkbox"/>
Educational Certificates	<input type="checkbox"/>	2 passport sized photos	<input type="checkbox"/>
Academic Transcripts	<input type="checkbox"/>	Exemption/Credit Transfer Application Form (if applicable)	<input type="checkbox"/>
Applicant's Employment Letter (if applicable)	<input type="checkbox"/>	University Application Form (if applicable)	<input type="checkbox"/>
Applicant's Parents' Employment Letter (if applicable)	<input type="checkbox"/>	English Placement Test (EPT) (if applicable)	<input type="checkbox"/>

Please ensure all documents are complete and certified true copy, otherwise the application will be considered null & void.

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**SECTION I: BANK DETAILS**

 ➤ **TELEGRAPHIC TRANSFER (TT) / INTERNET-BANKING (IB)**

Account Name : Informatics Academy Pte. Ltd.  
 Bank Account Number : 033-900220-8  
 Name of Bank : DBS Bank Ltd.  
 Address of Bank : 12 Marina Boulevard, Marina Bay Financial Centre Tower 3 Singapore 018982  
 Branch Code : 033  
 Bank Code : 7171  
 Swift Code : DBSSSGSG  
 Beneficiary's Address : 100 Victoria Street #13-01/02 National Library Building Singapore 188064.

 ➤ **FLYWIRE - FOR FOREIGN CURRENCY PAYMENT ONLY**

<https://www.flywire.com/pay/informaticsacademypl>

 ➤ **NETS / CREDIT CARDS**

 ➤ **CHEQUES**

Payable To : Informatics Academy Pte. Ltd.

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**SECTION J: MEDICAL INSURANCE COVERAGE**

Informatics Academy will enrol all eligible students in its group medical insurance policy.

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**SECTION K: MANDATORY INFORMATION FOR INTERNATIONAL APPLICANTS**

1. Applicant cannot attend lessons without a valid Student Pass.
2. Applicants cannot be involved in any criminal or drug-related activities in Singapore.
3. Applicant cannot engage in any form of employment or in any business, profession or occupation in Singapore, paid or unpaid without written consent from the Immigration and Checkpoints Authority of Singapore.
4. Applicants must maintain at least 90% attendance at ALL times.
5. Applicant cannot attend any other programme without consent from the Immigration and Checkpoints Authority of Singapore.

## **SECTION L: WITHDRAWAL AND REFUND POLICY**

### Programme Withdrawal:

1. Duly completed "Withdrawal Form" with supporting documents must be submitted to the Student Services Department, which shall serve as written notice of withdrawal from the applicant. For students under 18 years of age, Informatics Academy will seek parental/guardian approval prior to processing the request for withdrawal. Informatics Academy will process the request and refund to the student within 7 working days as per its Refund Policy.
2. Cooling off period of 7 working days will be given to new applicants upon signing the Student Contract. A student may withdraw from the programme with submission of written notice within these 7 working days, notwithstanding if the programme has commenced. The student will be entitled to the maximum refund amount stipulated as below:

<b>REFUND TABLE</b>	
<b>% of [the amount of the fees paid under Schedule B &amp; C]</b>	<b>If Applicant's written notice of withdrawal is received:</b>
[80%]	("Maximum Refund") More than [30] days before the Programme Commencement Date
[65%]	Before, but not more than [30] days before the Programme Commencement Date
[50%]	Before, but not more than [15] days before the Programme Commencement Date
[0%]	Before, but not more than [8] days before the Programme Commencement Date

*Note: "Any bank charges incurred during the refund process shall be paid by the student."*

### Fee Protection Scheme (FPS) & Medical Insurance:

1. Under the prevailing FPS guidelines, students should not make fee payment exceeding 12 months of the programme fee.
2. Refund of FPS & Medical Insurance payment will be on a case-by-case basis as it is subjected to approval and conditions of the insurance providers. An administrative fee (as indicated in the Student Contract) will be charged for processing the refund.
3. Students are to refer to the PEI-Student Contract 3.1 for full details of the Refund Policy.

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## **TERMS AND CONDITIONS (TO BE COMPLETED BY APPLICANT AND PARENT/GUARDIAN)**

I confirm that the information given in this form is true, complete and accurate. No information requested or other material information has been omitted. I give my consent to the processing of my data by Informatics Academy and its related companies/affiliates/agents/service providers.

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 Signature of Applicant

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 Signature of Parent/Guardian *(if Applicant is below 18 years old)*


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 Date

**2) AGENT DECLARATION (TO BE COMPLETED BY AGENT)**

I/We declare that I/we have recruited the applicant in accordance with the requirements of Informatics Academy and hereby handover the relevant documents for the purpose of Admissions and Student Pass Application. I confirm that I am not aware of any false/incomplete/inaccurate information given in this form nor any omission of any facts that may affect this application.

Company Name : \_\_\_\_\_ Date : \_\_\_\_\_

Representative's Name : \_\_\_\_\_ Signature : \_\_\_\_\_

Email Address : \_\_\_\_\_ Telephone No. : \_\_\_\_\_

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**3) FOR OFFICIAL USE ONLY**

Staff's Name : \_\_\_\_\_ Staff's Signature: \_\_\_\_\_

Supervisor's Name : \_\_\_\_\_ Supervisor's Signature: \_\_\_\_\_

Date : \_\_\_\_\_

Remarks : \_\_\_\_\_

**FOR INTERNATIONAL STUDENTS ONLY**

A) APPLICANT'S NATURAL PARENTS AND/OR STEP PARENTS					
Full Name (As appears in travel document)	Relationship (e.g. natural father, stepfather, mother)	Date of Birth (dd/mm/yyyy)	Nationality	Residential Status in Singapore	Occupation
				<input type="checkbox"/> S'pore Citizen / S'pore Permanent Resident NRIC No: <input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass, etc.) FIN No: <input type="checkbox"/> None of the above	
				<input type="checkbox"/> S'pore Citizen / S'pore Permanent Resident NRIC No: <input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass, etc.) FIN No: <input type="checkbox"/> None of the above	
				<input type="checkbox"/> S'pore Citizen / S'pore Permanent Resident NRIC No: <input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass, etc.) FIN No: <input type="checkbox"/> None of the above	
				<input type="checkbox"/> S'pore Citizen / S'pore Permanent Resident NRIC No: <input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass, etc.) FIN No: <input type="checkbox"/> None of the above	

B) APPLICANT'S SPOUSE (IF APPLICABLE)					
Full Name (As appears in travel document)	Relationship (e.g. husband/wife)	Date of Birth (dd/mm/yyyy)	Nationality	Residential Status in Singapore	Occupation
				<input type="checkbox"/> S'pore Citizen / S'pore Permanent Resident NRIC No: <input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass, etc.) FIN No: <input type="checkbox"/> None of the above	

C) APPLICANT'S SIBLINGS				
Full Name (As appears in travel document)	Relationship (e.g. brother/sister)	Date of Birth (dd/mm/yyyy)	Nationality	Residential Status in Singapore
				<input type="checkbox"/> S'pore Citizen / S'pore Permanent Resident NRIC No:
				<input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass, etc.) FIN No:
				<input type="checkbox"/> None of the above
				<input type="checkbox"/> S'pore Citizen / S'pore Permanent Resident NRIC No:
				<input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass, etc.) FIN No:
				<input type="checkbox"/> None of the above
				<input type="checkbox"/> S'pore Citizen / S'pore Permanent Resident NRIC No:
				<input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass, etc.) FIN No:
				<input type="checkbox"/> None of the above

D) APPLICANT'S FINANCIAL SUPPORT DETAILS (TO BE COMPLETED BY APPLICANT FROM VISA-REQUIRED COUNTRIES)					
Applicant	Average Monthly Income for past 6 months		Applicant's Spouse	Average Monthly Income for past 6 months	
	Current Savings (e.g. Fixed Deposit)			Current Savings (e.g. Fixed Deposit)	
Applicant's Father	Average Monthly Income for past 6 months		Applicant's Mother	Average Monthly Income for past 6 months	
	Current Savings (e.g. Fixed Deposit) in local currency			Current Savings (e.g. Fixed Deposit)	
Other financial support from immediate family members:	<input type="checkbox"/> Yes <input type="checkbox"/> No (if Yes, please furnish details on a separate sheet)				

E) ANTECEDENT		
1. Have you been refused entry or deported from any country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Have you been charged in a court of law in any country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Have you been refused entry into Singapore before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Have you ever entered into Singapore using another Passport or Name?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
F) DECLARATION BY APPLICANT		
<p>1. I hereby declare that all particulars furnished by me in this application form, are true and correct.</p> <p>2. I undertake not to study without a valid Student Pass.</p> <p>3. I undertake, not to misuse controlled drugs or to take part in any political or other activities during my stay in Singapore, which would make me an undesirable or prohibited immigrant under the Immigration Act.</p> <p>4. I undertake to comply with the provisions of the Immigration Act not contravene any laws in force in Singapore during my stay.</p> <p>5. I further undertake not to be engaged in any form of employment or in any business, profession or occupation in Singapore whether paid or unpaid without a valid work pass issued under the Employment of Foreign Manpower Act.</p> <p>6. I am aware that overstaying or working illegally in Singapore, is a serious offence and upon conviction, the penalties may include mandatory imprisonment and caning.</p> <p>7. I understand that if the Controller of Immigration is satisfied that any member of my family or I, breach this undertaking or become an undesirable or prohibited immigrant, he/she will cancel my immigration pass and the passes of my family members and we may be required to leave Singapore within 24 hours of such cancellation.</p> <p>8. I give my consent for Informatics Academy and its related companies/affiliates/agents/service providers to obtain and verify information from or with any source, as you deem appropriate for the assessment of my application for Student Pass.</p>		
_____ Name & Signature of Applicant	_____ Name & Signature of Parent/Guardian <i>(if Applicant is below 18 years old)</i>	_____ Date



**PERSONAL DATA PROTECTION ACT (PDPA) CONSENT FORM**

- 1) I hereby agree and consent to allow Informatics Academy and its related companies/affiliates/agents/service providers (collectively "Informatics Group") to:
- a) collect, use, disclose and/or process personal data about me set out in this application form and/or otherwise provided by me or my parent/guardian or possessed by Informatics and that I may in future provide for the purposes as stated in Informatics' Personal Data Protection Policy which in summary includes but not limited to the following purposes:
    - to respond to my enquiries and provide me with marketing and promotional information relating to programmes, products and/or services that Informatics may be marketing or offering, whether now or in the future; and
    - to provide me with Informatics' programmes, services and products and administering and/or managing my relationship with Informatics;
  
  - b) send me marketing and promotional information through the following modes of communication:
    - Postal mail to : \_\_\_\_\_
    - Electronic transmission to my email address : \_\_\_\_\_
    - To my telephone number : \_\_\_\_\_
      - \*\*\* Voice call / Phone call
      - \*\*\* SMS / MMS
      - \*\*\* Other data applications (e.g. WhatsApp)
  
  - c) disclose personal data about me to Informatics Group for the purposes stated above.
- 2) I hereby represent and warrant that I am the user and/or subscriber of the telephone number provided by me and that I have read and understood the above provisions.

Signature of Applicant	Signature of Parent/Guardian <i>(if Applicant is below 18 years old)</i>	Date
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\*\*\* Please indicate that you agree to Informatics Group using that mode of communication by inserting a  in the box.

*Note: Even if you do not sign or complete this form, please note that Informatics Group reserves its right to send a specified text message to your Singapore telephone number, if there is an ongoing relationship between Informatics Group and you and the purpose of the message is related to the subject of the ongoing relationship.*