

CLADDING AND CURTAINWALL INSTALLATION Skill Evaluation Certificate (Knowledge) – SEC(K)

WTU Funding Application No.:

Application Form [Please tick (✓)]

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1st SEC(K) (Not eligible for funding)	<input type="checkbox"/> Cladding Installation <input type="checkbox"/> Curtainwall Installation	2nd SEC(K) for Multi-Skilling	<input type="checkbox"/> Cladding Installation <input type="checkbox"/> Curtainwall Installation
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Language of Instruction English

(in BLOCK letters) (underline surname) (attach copy of I/C or Work Permit card)

Name

NRIC /Passport No. _____ Core Trade Registration No: _____

Work Permit No: _____ Nationality: _____

Date of Birth ____ / ____ / ____ Age: _____ Sex: *M / F Tel / HP No.* _____
day month year

Company UEN No. _____ (For company sponsored application only)

Company: _____ Contact Person: _____

Telephone no: _____ Fax no: _____ Email: _____

Mailing Address: _____

Postal code: _____

Total course fee: _____ (Including 9% GST)

Payment Mode: By Bank Transfer / Paynow

*Please refer to the attached manual for details on how to fill out this application form.

DECLARATION (please tick ✓ where applicable)

* I / We hereby confirm that all information given in this application is true and accurate; and that the above applicant meets the entry requirements as stated in this brochure.

<input type="checkbox"/> Photocopy of Participant's 1 st SEC(K)	<input type="checkbox"/> WTU Funding Application
<input type="checkbox"/> Photocopy of Participant's NRIC / Work Permit	<input type="checkbox"/> Employment records printed via MOM portal
<input type="checkbox"/> Photocopy of Participant's Passport	

COMPANY STAMP (For company application only)

I / We agree to allow BCA to disclose to other government agencies and / or the Government any information relating to me / us in connection with, arising from or relating to this application, including but not limited to my / our personal particulars and my / our test results.

*Delete wherever necessary

Signature: _____
*Company / individual application

For Official Use:

Application No.: _____ Official Receipt No.: _____

Processing Officer: _____ Cashier: _____
Signature / date Signature / date