



Center for Competency-Based Learning and Development (CBLD) Pte Ltd  
 140 Paya Lebar Road #06-05 AZ @ Paya Lebar S(409015)  
 Phone: (65) 6339 9272 Fax: (65) 6222 2370

S/N:

**WSQ HR COURSE APPLICATION FORM**  
**CONFIDENTIAL**

Version 4.3 (May 2018)

**Personal Information**

Name (as in NRIC) : \_\_\_\_\_ Sex : Female / Male  
(Pls underline your Surname)

Residential Address : \_\_\_\_\_ Tel (H) : \_\_\_\_\_  
(For self-sponsored only)

\_\_\_\_\_ Tel (O) : \_\_\_\_\_

Office Email : \_\_\_\_\_ Tel (HP): \_\_\_\_\_

Personal Email : \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Age : \_\_\_\_\_

NRIC/Fin No: \_\_\_\_\_ Nationality : \_\_\_\_\_

Singapore PR: Yes / No (Please circle where appropriate) Race: \_\_\_\_\_

Highest Education: Secondary / 'O' Level / NTC 3 / NTC 2 / 'A' Level / Diploma / Degree / Others: \_\_\_\_\_  
(please specify)

Language Proficiency: English / Mandarin / Malay / Tamil

**Employment Details**

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

Industry: \_\_\_\_\_

Designation: \_\_\_\_\_

Basic Salary: 1. Unemployed 2. Below \$1,000 3. \$1,000 - \$1,499 4. \$1,500 - \$1,999 5. \$2,000 - \$2,499  
 6. \$2,500 - \$2,999 7. \$3,000 - \$3,499 8. \$3,500 and Above (Please circle where appropriate)

**Choice of Course**

	<u>Competency Unit</u>	<u>Date of Training</u>	<u>For official use</u>
<input type="checkbox"/>	Develop and Implement In-House Competency and Career Pathing Framework		
<input type="checkbox"/>	Conduct Competency-Based Interviews and Make Hiring Decisions		

**How would you apply the skills acquired from the courses?**

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**Are you sponsored by your company for the above course?** Yes / No

If you are sponsored by your company, please ensure that training grant application is submitted via Skills Connect to ensure that funding is approved prior to commencement of class. Please also fill up all the invoicing details on the following next page.

If you are self-sponsored, CBLD will submit the training grant application on your behalf. Invoice will be addressed to your name, and it will be sent to your residential address.

**Are you using Skillsfuture Credit for this application?** Yes / No Amount : \_\_\_\_\_  
**To be paid to\* :** CBLD Yourself (Pls delete accordingly)

Please note that Skillsfuture Credit applications are to be made 30 days or latest 90 days after Course Start Date, and are subject to approval. Skillsfuture Credits are to be used for individually sponsored participants only.

Skillsfuture Credit Applications made before Course Start Date can be arranged to be paid directly to CBLD. Otherwise, the applicant may pay full fee and claim Skillsfuture Credits directly to him/herself.

**Note: All fields are to be completed.**

## Invoicing Details

Name of Company to be invoiced:

Small Medium Enterprise \*

Yes / No (Please circle accordingly)

Company's Invoicing Address:

Attention to: (person in your company to receive the invoice)

Contact No. (contact no. of the person receiving the invoice):

Email Address (email address of the person receiving the invoice):

\*Small Medium Enterprises are companies with annual sales turnover of not more than \$100 million OR employment size not more than 200 workers.

## Previous Qualifications

Please indicate units which you have completed (Please attach a copy of your Certificate):

(e.g. Conduct Competency-Based Interviews and Make Hiring Decisions)

Name of institution that the course was taken :

## Terms and Conditions

- 1 Participants must be at least **18 years of age**
- 2 Applicants that have special requirements when attending courses should highlight their concerns during application. We will advise the individual accordingly.
- 3 Be able to listen and speak English at a proficiency level equivalent to **Workplace Literacy and Numeracy (WPLN) Level 8**
- 4 Be able to read and write English at a proficiency level equivalent to **Workplace Literacy and Numeracy (WPLN) Level 8**
- 5 Be able to manipulate numbers at a proficiency level equivalent to **Workplace Literacy and Numeracy (WPLN) Level 7**
- 6 Once enrolled in the course, participants must adhere to all rules and regulations of the institution conducting the course
- 7 Participants must achieve 75% attendance and complete all assessments successfully before they can be awarded a Statement of Attainment (SOA) for the module they undertake and in order to be eligible for the funding. If these criteria are not met, participants will have to reimburse CBLD Center the full course fee plus GST.
- 8 CBLD reserves the right to claim the full fee (including GST) from companies/individuals if funding from SSG is not approved.
- 9 Participants are only funded once for each module.
- 10 Regardless of any reasons, if the participant subsequently cancels or postpones a confirmed booking, a cancellation fee will be levied as follows:

1) More than 2 weeks before class commencement	No Penalty
2) Less than 2 weeks before class commencement	50% of the course fee before funding
3) Less than 1 week before class commencement	100% of the course fee before funding
- 11 Additional criteria, terms and conditions may be added to specific courses.
- 12 SSG will contact you directly to conduct two post-course evaluation surveys:

a) The electronic Quality Survey will be conducted after the course end date. It will be emailed to the trainee via SSG's central survey system.	b) The Outcome survey will be sent to shortlisted trainees who have completed their full qualification course(s) at least six months earlier.
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Trainee is encouraged to provide your personal email address and phone number for SSG to conduct the surveys.
- 13 CBLD reserves the right to reveal information of participants for the purpose of publicity and/or statistical studies unless such right is revoked in writings by the participants.

## Use of Personal Information

I agree/ do not agree\*\* to give CBLD Pte Ltd the rights to use and reveal my information for the purpose of CBLD's publicity and / or statistical studies.

\*\*(Please circle accordingly)

## Declaration

- 1 I hereby give the consent to CBLD to hold any photography and/or video recording session during training for the purpose of CBLD's publicity.
- 2 I hereby declare that the information given in this application is true and correct and that I have not willfully suppressed any material fact.
- 3 I have read the terms and conditions for application and agree to abide by it.

Signature of Applicant / Person-in-Charge

Date

\* Please make payment by Cash or crossed Cheque to 'CBLD Pte Ltd' and include your name, NRIC number, course title and course dates at the back of the cheque.

Note: All fields are to be completed.