

# WSQ Programme Registration Form

**WSQ CERTIFICATE IN HOTEL AND ACCOMMODATION SERVICES**  
 Front Office       Housekeeping

**WSQ DIPLOMA IN TOURISM**

## PERSONAL PARTICULARS

<b>Name:</b> _____ As in NRIC/Passport. Please underline Surname	
<b>NRIC/FIN No./Others:</b> _____	<b>Date of Birth:</b> ___/___/___ (DD/MM/YYYY) <input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Mailing Address:</b> _____	
<b>Postal Code:</b> _____	<b>Mobile No.:</b> _____ <b>Home No.:</b> _____ <b>Email:</b> _____
<b>Nationality:</b> <input type="checkbox"/> Singaporean <input type="checkbox"/> Singapore PR <input type="checkbox"/> Others _____ (Please refer to page 2)	
<b>Race:</b> <input type="checkbox"/> Chinese <input type="checkbox"/> Malay <input type="checkbox"/> Indian <input type="checkbox"/> Eurasian <input type="checkbox"/> Others: _____	
<b>Previous Industry Experience:</b> <input type="checkbox"/> Construction & Manufacturing <input type="checkbox"/> Information & Communications <input type="checkbox"/> Financial & Banking <input type="checkbox"/> Real Estate & Property <input type="checkbox"/> Logistic & Transport <input type="checkbox"/> F&B <input type="checkbox"/> Tourism <input type="checkbox"/> Healthcare, Community & Social Services <input type="checkbox"/> Retail <input type="checkbox"/> Others (pls specify _____) <input type="checkbox"/> Unemployed	
<b>Company Name:</b> _____	<b>Designation:</b> _____
<b>Salary:</b> <input type="checkbox"/> Unemployed <input type="checkbox"/> Below \$1,000 <input type="checkbox"/> \$1,000 to \$1,499 <input type="checkbox"/> \$1,500 to \$1,999 <input type="checkbox"/> \$2,000 to \$2,499 <input type="checkbox"/> \$2,500 to \$2,999 <input type="checkbox"/> \$3,000 to \$3,499 <input type="checkbox"/> \$3,500 & above	
<b>Highest Educational Level:</b> <input type="checkbox"/> No Formal Qualification & Lower Primary <input type="checkbox"/> Primary <input type="checkbox"/> Lower Secondary <input type="checkbox"/> Upper Secondary (General) <input type="checkbox"/> Upper Secondary (Vocation) <input type="checkbox"/> 'N' Level <input type="checkbox"/> 'O' Level <input type="checkbox"/> 'A' Level <input type="checkbox"/> NITEC <input type="checkbox"/> Higher NITEC <input type="checkbox"/> Polytechnic Diploma <input type="checkbox"/> Professional Qualification & Other Diploma <input type="checkbox"/> University First Degree <input type="checkbox"/> University Post-graduate Diploma/Degree	
<b>How did you know about our course(s)? (select more than one if necessary)</b> <input type="checkbox"/> Straits Times <input type="checkbox"/> Today <input type="checkbox"/> Lianhe Zaobao <input type="checkbox"/> The New Paper <input type="checkbox"/> Roadshows/Career Fairs/Open House <input type="checkbox"/> Flyers/Brochures <input type="checkbox"/> Publicity Email <input type="checkbox"/> Magazine <input type="checkbox"/> CDC <input type="checkbox"/> WDA <input type="checkbox"/> Radio <input type="checkbox"/> Website <input type="checkbox"/> Search Engine, e.g. Yahoo! Google, etc <input type="checkbox"/> Friends & Relatives <input type="checkbox"/> Employer <input type="checkbox"/> Others	
<b>For enquiries, please contact:</b> Joanne Yeo at (65) 6500 3347, Email: <a href="mailto:joanne.yeo@the-ascott.com">joanne.yeo@the-ascott.com</a> Dacia Cheang at (65) 6500 3346, Email: <a href="mailto:dacia.cheang@the-ascott.com">dacia.cheang@the-ascott.com</a> Pamela Shee at (65) 6500 3351, Email: <a href="mailto:pamela.shee@the-ascott.com">pamela.shee@the-ascott.com</a> Regina Cho at (65) 6500 3350, Email: <a href="mailto:regina.cho@the-ascott.com">regina.cho@the-ascott.com</a>	
<b>FOR ADMINISTRATIVE USE:</b> CDC Assistance : <input type="checkbox"/> Yes <input type="checkbox"/> No Registration Source: <input type="checkbox"/> CDC Referral <input type="checkbox"/> Email/Phone Enquiry <input type="checkbox"/> Walk-in <input type="checkbox"/> WSQ Briefing - Session Date: _____ <input type="checkbox"/> Career Fair - Event: _____ / Date: _____ <input type="checkbox"/> Others _____ Interview: <input type="checkbox"/> Yes <input type="checkbox"/> No    Interviewed By: _____    Interview Date: _____ Qualify: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> KIV - Pending WPLN/English qualification checks <input type="checkbox"/> KIV - Others: _____ Comments: _____ _____	

**NATIONALITY:**

Andorran	United Arab Em.	Afghan	Antigua	Albanian	Armenian
Netherlands Antil.	Angolan	Argentinian	American Samoa	Austrian	Australian
Azerbaijani	Bosnian	Barbados	Bangladeshi	Belgian	Burkina Faso
Bulgarian	Bahraini	Burundi	Benin	Belarussian	Bruneian
Bolivian	Brazilian	Bahamas	Bhutan	Myanmar	Botswana
Belize	Canadian	Croatian	C'Tral African Rep	Congo	Swiss
Ivory Coast	Cook Islands	Chilean	Cameroon	Chinese	Colombian
Costa Rican	Czechoslovak	Cuban	Cape Verde	Cypriot	Czech
German, East	German, West	German	Djibouti	Danish	Dominica
Dominican Republic	Algerian	Ecuadorian	Egyptian	Western Sahara	Estonian
Eritrean	Spanish	Ethiopian	Finnish	Fijian	French
Gabon	British	Br Dep Ter Citizen	Grenadian	Br Overseas Cit.	French Guiana
Br Nat. Overseas	Ghanaian	Br Protected Pers.	Gambian	Guinea	Georgian
Guadeloupe	Equatorial Guinea	Greek	Guatemala	Guam	Guinea-Bissau
Guyana	Hong Kong	Honduran	Haitian	Hungarian	Upper Volta
Indonesian	Irish	Israeli	Indian	Iraqi	Iranian
Iceland	Italian	Jamaican	Jordanian	Japanese	Cambodian
Kenyan	Kirghiz	Kampuchean	Kiribati	Comoros	Korean, North
Korean, South	Kyrghis	Kuwaiti	Kyrgyzstan	Kazakh	Laotian
Lebanese	St. Lucia	Lithuanian	Liechtenstein	Sri Lankan	Liberian
Lesotho	Luxembourg	Latvian	Libyan	Moroccan	Macedonia
Monaco	Moldavian	Micronesian	Madagascar	Marshallese	Mali
Mongolian	Macao	Martinique	Mauritanian	Maltese	Mauritian
Maldivian	Malawi	Mexican	Malaysian	Mozambique	Namibia
New Caledonia	Niger	Nigerian	Nicaraguan	Dutch	Norwegian
Nepalese	Nauruan	Non-Singapore Citizen	Netherlands	Niue Island	New Zealander
Oman	Panamanian	Pacific Is Trust T	Peruvian	French Polynesia	Papua New Guinea
Filipino	Pitcairn	Pakistani	Polish	Palestinian	Puerto Rican
Portuguese	Palauan	Paraguay	Qatar	Reunion	Russian
Romanian	Rwanda	Saudi Arabian	Solomon Islands	Seychelles	Sudanese
Swedish	Singapore Citizen	Slovenian	Slovak	Sierra Leone	Senegalese
Somali	Suriname	Stateless	Sao Tome & Princi.	Russian	Salvadoran
St Kitts & Nevis	Syrian	Swazi	Chadian	Timorese	Togo
Thai	Tajikistani	Tadzhik	Tokelau Islands	Turkmen	Tunisia
Tonga	East Timorese	Turk	Trinidad & Tobago	Tuvalu	Taiwanese
Tanzanian	Ugandan	British Subject	Unknown	Ukrainian	American
Uruguay	Uzbek	St. Vincent	Venezuelan	Vietnamese	Vanuatu
Wallis And Futuna	Samoan	Yemen, South	Yemen Arab Rep	Yemeni	Yugoslav
South African	Zambian	Zairan	Zimbabwean		

**TYPE OF REGISTRATION:**

Registry of Company	Registry of Business	Limited Liability Partnership	Accounting Firms	Architect Firms	Dental Clinics
Clinics	Land Surveyor Firms	Law Firms	Engineering Firms	Veterinary Clinics	Government-Aided/Private Schools
Ministries	Organs of State	Statutory Boards	Govt/Quasi-Govt Training Institutions	Registry of Societies	Cooperative Societies
Mutual Benefit Organizations	Trade Unions	Religious Organizations	Management Corporations	Representative Offices	Other Non-Profit Organizations
Foreign Embassies	Trade Commissions				

<b>EMPLOYMENT HISTORY OF LAST 3 COMPANIES:</b> (in chronological order)			
Name of Current Employer			<input type="checkbox"/> Currently Unemployed Since _____ (mm/yy)
Date Joined	Date Left	Designation/ Job Title	Last Drawn Salary
Reason for Leaving			
Name of Previous Employer			
Date Joined	Date Left	Designation/ Job Title	Last Drawn Salary
Reason for Leaving			
Name of Previous Employer			
Date Joined	Date Left	Designation/ Job Title	Last Drawn Salary
Reason for Leaving			
<b>TRAINING / PROFESSIONAL COURSES ATTENDED OR CURRENTLY PURSUING:</b>			
Course Title	Institute / Training Centre	From (MM/YY)	To (MM/YY)
<b>PLEASE ANSWER ALL THE QUESTIONS</b> ( *Please delete accordingly )			
(i) Are you willing to work in the hospitality (hotels & accommodation) sector?			Yes / No *
(ii) Are you willing to commit to work in the local Tourism industry after completing this training?			Yes / No *
(iii) Have you previously attended any WSQ related programs (e.g. CSP / ESS) or received any training funding from WDA?			Yes / No *
(iv) Do you have or had any physical or mental impairment, serious ailment or disability? (e.g. diabetes, tuberculosis, epilepsy, etc)			Yes / No *
(v) Are you currently undergoing medical treatment?			Yes / No *
(vi) Do you have any police/criminal records?			Yes / No *
<i>If "Yes" to question (iii), (iv), (v) or (vi), please give details below.</i>			
<b>DECLARATION</b>			
I declare that all the information contained in this application, including any other attached documents, is true and that I have not wilfully suppressed any material facts. I understand that non-disclosure and/or misrepresentation of any material facts required in this application will be sufficient cause for this application to be rejected.			
Name _____		Signature _____	Date _____