



AVANTA ACADEMY

116 Lavender Street, #03-04 Pek Chuan Building, Singapore 338730
Tel: 6291 0008 | Fax: 62956683 | Email: enquiry@avanta-acad.edu.sg

APPLICATION FORM

COURSE TITLE:

INTAKE NO:

COMMENCEMENT DATE:

Self-Sponsored Company Sponsored

(Please tick the appropriate Box)

Passport Size
Photo

1) PARTICULARS OF COMPANY AND CONTACT PERSON

(This portion **MUST** be completed for company-sponsored participant, leave blank if otherwise)

Company Name _____

UEN No _____

Office Address _____

Name _____

Tel

:

Designation _____

Fax

:

Email _____

Mobile

:

2) PERSONAL PARTICULARS

Company Name _____

Name _____

Home Address _____

NRIC / FIN _____

Nationality :

Date of Birth _____

Age

:

Email _____

Mobile

:

3) EDUCATIONAL QUALIFICATIONS (Please complete in reverse chronological order)

Duration of Course		Name of School (College/Polytechnic/University Attended)	Highest Academic Qualifications Attained
From (DD/MM/YY)	To (DD/MM/YY)		



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4) EMPLOYMENT HISTORY (Please complete in reverse chronological order)

From – To (DD/MM/YY)	Employer	Designation	Key Responsibilities

5) GENERAL INFORMATION

- All courses will be conducted in English unless otherwise stated.
- Course registration shall be applied 3 days in advance and Registration is based on a First-Come-First-served basis.
- To confirm the registration, payment of the registration fees must be made before the commencement date.
- Avanta Academy reserves the right to decline the candidate from attending the class at its sole discretion.
- No cert. /card will be issued unless full payment is received by Avanta Academy
- Candidate is reminded to attend the classes punctually. Full course fees will still be imposed if the candidate does not attend the class without prior notice to the Institute.
- The Institute reserves the right to alter or amend the course and other related fees as it deems necessary.
- Reschedule or change of course is allowed only once and is subjected to the availability of the course.
- An administrative charge is applicable if the request is made 2 working days or less before the course commencement date.
- Avanta Academy reserves the right to defer/ cancel any scheduled course due to unforeseen circumstances.

By signing on this form, I allow Avanta Academy to use my photos for promotional publication. I confirm that the above information is true and correct to the best of my knowledge at the time of my application. If accepted, I understand to abide by the Constitution of the Institute.

Officer-in-charge Signatory
Date:

Student Signature
Date:

FOR OFFICIAL USE ONLY:

Supporting Documents: Copy of NRIC/FIN Copy of Highest Qual. Certs/Transcripts Copy of Resume
Verified by: _____ Date: _____

Please submit the application form duly completed to:

AVANTA ACADEMY 116 Lavender Street, #03-04 Pek Chuan Building, Singapore 338730
Tel: (65) 6291 0008 Mobile: (65) 9061 3311 Fax: (65) 6295 6683
Email: enquiry@avanta-acad.edu.sg Website: <http://www.avanta-acad.edu.sg>

Please send form with a copy of your **NRIC/ FIN** to **enquiry@avanta-acad.com.sg** or fax to (65) **6295 6683**
(This form may be photocopied for additional participants)