

BCA APPROVED TRAINING AND TESTING CENTRE (ATTC) FIRE SPRINKLER INSTALLATION APPLICATION FORM

<input type="checkbox"/> Familiarisation Courses + Skills Assessment (FC+SA)	<input type="checkbox"/> Skills Assessment (SA)
<input type="checkbox"/> Trade Foreman (\$1562.20)	<input type="checkbox"/> Tradesman (\$1385.65) <input type="checkbox"/> Upgrade to Trade Foreman (\$272.85)
<input type="checkbox"/> Multi Skill Scheme 2nd SEC(K) (\$1562.20)	<input type="checkbox"/> SEC (K) (\$2000.90) <input type="checkbox"/> CET (\$139.10)

SECTION 1 : APPLICANT DETAILS

Name : _____	Date of Birth : _____
NRIC / Work Permit : _____	Nationality : _____
Passport No : _____	Contact Number : _____
Email : _____	

* For Individual Applicant, payment must be made in cash
 (NOTE : Payment **must** be done first)

SECTION 2 : EMPLOYER DETAILS (For Company Sponsored Applicant)

Company Name : _____	Company UEN : _____
Contact Person : _____	Email : _____
Telephone Number : _____	Fax Number : _____
Address : _____	

Mode of Payment : _____	
Total Course Fee with GST : S\$ _____	
Cheque Number : _____	Dated : _____ For Amount : _____

DECLARATION (Please tick where applicable)

* I / We agree that any damages to the training centre's equipment or machinery by our worker will be liable by us.

* I / We declare that all information given above is true and correct. We understand that the applicant (s) would be disqualified and the course + test fees paid will be forfeited and tests taken to be treated as null and void if any information above given is untrue.

* I / We have read and understood that withdrawal, replacement and postponement are strictly NOT ALLOWED.

* I / We agree to allow **Deluge Fire Protection (S.E.A) Pte Ltd** to disclose to BCA 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.

* 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.

WTU Funding for company sponsoring foreigners will cease by **31/05/2020**.
 WTU Funding support for Singaporeans / SPR only from **01/06/2020 to 31/03/2021**. (Please select 1 option)

* I / We have decided to apply for this funding for above worker
 Please indicate WTU application reference number : _____

* I / We have decided NOT to apply for this funding for above worker

 Name / Signature / Date

 Company Stamp