



SINGAPORE INSTITUTE OF SURVEYORS & VALUERS

20 Maxwell Road, #10-09B Maxwell House, Singapore 069113
Tel: 65 62223030 Fax: 65 62252453 Website: www.sisv.org.sg

APPLICATION FOR CADASTRAL SURVEYING COURSE

PERSONAL PARTICULARS

Name (as in NRIC): _____

NRIC No: _____ Date of Birth: _____ Sex: _____

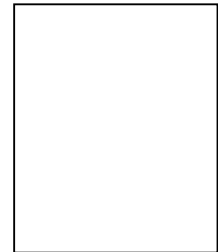
Nationality: _____ Mobile No: _____

Mailing Address: _____

_____ Postal Code: _____

Educational Qualifications: _____

(Please attach a photocopy of your NRIC/Work Permit, GCE 'O' Level Certificate or any Other Relevant Certificate)



PRESENT EMPLOYMENT

Company's Name: _____ Position Held: _____

Company's Address: _____ Postal Code: _____

Tel No: (O) _____ (F) _____ Email: _____

PAST EXPERIENCE IN THE LAND SURVEYING INDUSTRY

| Name of Company | Position Held | Period (Indicate dates) |
|-----------------|---------------|-------------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Registration / Payment

| Course Fee per Trainee | | SDF Assistance Per Trainee | Pay to SISV |
|---------------------------|--------------------------|-----------------------------|-------------|
| Staff of SISV Member Firm | \$1,391.00 (Incl 7% GST) | \$504.00 | \$887.00 |
| Non Member | \$1,605.00 (Incl 7% GST) | *Terms & Conditions applies | \$1,101.00 |

SPONSORED BY COMPANY: YES / NO

APPLY SDF: YES / NO

(Please provide Company endorsement letter if participant is sponsored by Company and/or applying for SDF Assistance)

***NOTE:**

- Full payment must be made before commencement of course.
- Company sponsoring their employee/staff applying for SDF Assistance must enroll online with SDF Easy Net at least one working day before commencement of course. Otherwise they will not be eligible for any SDF Assistance.
- Please complete Form SEN 2C if Companies without access to the internet applying for SDF Assistance. This form must be submitted at least one working day before commencement of course.

Employer's Name & Signature
Date: _____

Company Stamp

Applicant's Signature
Date: _____

For Official Use

Batch # _____ Cheque: _____ Amount: _____ Official Receipt: _____

Note: The Institute reserves the rights to cancel or postpone the course

Refer By: _____