

REGISTRATION FORM for Standard First Aid Course

(Accredited by Singapore Resuscitation and First Aid Council)

Course Fee: S\$206

SDF funding & SkillsFuture claim for this course is now available for Singapore Citizens and PRs.

<p>* Passing Criteria: SFA: 10 MCQ – 80% Passing Grade CPR + AED: 20 MCQ – 80% Passing Grade Practical Assessment – At least 100% competency</p>	<p>COURSE EXAMINATION REQUIREMENTS: Only participants with 100% attendance</p> <p>A Pass of Competency will be awarded to participants who have successfully completed the course and passed the theory & practical examination.</p>
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Preferred Training Venue:

- Woodlands Training Centre
 On-site training at

Course date: _____
(Please refer to the website or call us)

For assistance, please call us at 66840783 / 96496957

(Please provide the venue address)

Part I: Sponsored by Company (To be completed only if applicant is sponsored by the company)

Company Name:		ROC No:	
Company Address:		Postal Code:	
Company Representative's Name:	Tel:	Email address:	

Part II: Applicant's Particulars

S/N	Full Name (In Block Letters)	NRIC No / Fin No*	Contact No.	Nationality	Date Of Birth	Highest Qualification

Note: Please bring writing materials when attending this course. Participants are requested to be in T-shirt and pants/slacks with comfortable shoes and socks. Avoid wearing dress, skirts and low-cut tops as the course requires (slight) physical activity.

Company Representative's Signature* & Date: _____ **Company Stamp:** _____

Part III: Applicant's Contact Details (To be completed only if applicant is **self-sponsored**)

Address: _____
 Contact No: _____ Email address: _____

Self-Sponsored Applicant's Signature* & Date: _____

*By signing this form, I declare that all the information submitted is true and I have read the terms & conditions in the next page of this application form.

