

CONFIDENTIAL



MARKETING
INSTITUTE OF
SINGAPORE
Training Centre

APPLICATION FOR (FULL TIME / PART TIME PROGRAMMES)

- English Preparatory Programme
(Please select: Level 1/2/3/4)
 - Certificate in Sales & Marketing
 - Diploma in Sales & Marketing Management
 - Diploma in Business Management
 - Diploma in Accounting & Finance
 - Diploma in International Hospitality & Tourism Management
 - Graduate Diploma in Marketing
 - Graduate Diploma in Brand Management
 - Graduate Diploma in Business Management
 - Professional Diploma in Asia Pacific Marketing
 - Bachelor of Arts (Hons) Business Management
 - Bachelor of Arts (Hons) Marketing Management
 - Master of Science in Marketing
 - Master of Business Administration
(Please select: General/Marketing)
 - Others: _____

- Date of Commencement: _____

IMPORTANT

- Please complete the form in full clearly using black or blue ink.
- Application with incomplete information and not accompanied by copies of supporting documents that are "Certified True Copies" will not be considered.
- **IF YOU ARE COMPANY SPONSORED, PLEASE ENSURE THAT THE SECTION "TO BE COMPLETED BY APPLICANT'S COMPANY" IS FILLED**
- Where not applicable, fill in the blanks using NA or NIL

Attach photo here

PERSONAL DETAILS

NRIC/PP NO :

FULL NAME :
(FULL NAME AS IT APPEARS IN NRIC OR PASSPORT. PLEASE UNDERLINE SURNAME.)

CHRISTIAN NAME :

TITLE : (DR/MR/MRS/MS/MDM/PROF/ASSOC PROF)

SEX : MALE / FEMALE DATE OF BIRTH :
Day Month Year

MARITAL STATUS : SINGLE / MARRIED

NATIONALITY :

IF YOU ARE NOT A SINGAPOREAN, PLEASE INDICATE YOUR STATUS: _____
 PERMANENT RESIDENT EMPLOYMENT PASS HOLDER WORK PERMIT HOLDER STUDENT'S PASS

RACE :

E-MAIL ADDRESS 1 :

E-MAIL ADDRESS 2 :

CONTACT INFORMATION: SINGAPORE

HOME ADDRESS :

HOME TELEPHONE : MOBILE:

EMERGENCY NO.:

CONTACT INFORMATION: HOME COUNTRY

HOME ADDRESS :

HOME TELEPHONE : MOBILE:

EMERGENCY NO.:

PRESENT EMPLOYMENT DETAILS (IF APPLICABLE)

COMPANY NAME :

COMPANY ADDRESS :

COMPANY TELEPHONE: EXT: FAX:

MAILING ADDRESS : HOME / OFFICE

DESIGNATION :

YEARS AT THIS POSITION _____ FROM _____ / _____
Month / Year

EDUCATIONAL QUALIFICATION

IMPORTANT: Certified true copies of supporting documents must be attached. Certification may also be made at MISTC upon presentation of originals.

MASTER	<input type="text"/>	FR	<small>Month / Year</small> <input type="text"/>	<input type="text"/>
INSTITUTION	<input type="text"/>	TO	<small>Month / Year</small> <input type="text"/>	<input type="text"/>
DEGREE	<input type="text"/>	FR	<small>Month / Year</small> <input type="text"/>	<input type="text"/>
INSTITUTION	<input type="text"/>	TO	<small>Month / Year</small> <input type="text"/>	<input type="text"/>
DIPLOMA	<input type="text"/>	FR	<small>Month / Year</small> <input type="text"/>	<input type="text"/>
INSTITUTION	<input type="text"/>	TO	<small>Month / Year</small> <input type="text"/>	<input type="text"/>
HIGH SCHOOL	<input type="text"/>	FR	<small>Month / Year</small> <input type="text"/>	<input type="text"/>
INSTITUTION	<input type="text"/>	TO	<small>Month / Year</small> <input type="text"/>	<input type="text"/>
OTHER QUALIFICATIONS	<input type="text"/>	FR	<small>Month / Year</small> <input type="text"/>	<input type="text"/>
INSTITUTION	<input type="text"/>	TO	<small>Month / Year</small> <input type="text"/>	<input type="text"/>

ENGLISH PROFICIENCY

IELTS: _____ TOEFL: _____ OTHERS: _____ YEAR ATTAINED: _____

SOURCE

FROM WHICH SOURCE DID YOU FIRST LEARN ABOUT THE PROGRAMME YOU ARE APPLYING? PLEASE TICK WHERE APPROPRIATE.

STRAITS TIMES / TODAY / MYPAPER / BUSINESS TIMES / LIANHE ZB / LIANHE WB / SIN MING / BERITA HARIAN

BROCHURES COMPANY EXHIBITIONS FAMILY

SCHOOL TALKS MISTC WEBSITE OTHER WEBSITES: _____

FRIENDS – NON MISTC STUDENT/GRADUATE AGENT

FRIENDS – MISTC STUDENT / GRADUATE
 NAME: _____ PROGRAMME: _____ INTAKE: _____

OTHERS (PLEASE SPECIFY): _____

PURPOSE

WHAT IS YOUR PURPOSE OF ATTENDING THIS PROGRAMME?

- TO GAIN A BASIC ORIENTATION ON THE SUBJECT
- TO GAIN GREATER DEPTH OF KNOWLEDGE IN THE SUBJECT
- TO LEARN HOW TO APPLY THE CONCEPTS IN THE SUBJECT
- TO GAIN PROFESSIONAL COMPETENCE IN THE SUBJECT
- OTHERS (PLEASE SPECIFY): _____

CHECK LIST

- COPIES OF CERTIFIED ACADEMIC TRANSCRIPT/CERTIFICATE ARE ATTACHED
- PHOTOCOPY OF THE NRIC (FRONT & BACK)
- CV / RESUME
- COMPANY RECOMMENDATIONS/SUPPORTING LETTER
- NON-REFUNDABLE APPLICATION PROCESSING FEE OF _____ (INCLUSIVE OF 7% GST)
- FUNDING (CDAC / SDF / NTUC-SEP)
- FULL PAYMENT

ADDITIONAL DOCUMENTS (INTERNATIONAL STUDENTS)

- BIRTH CERTIFICATE (ENGLISH TRANSLATED VERSION)
- PHOTOCOPY OF PASSPORT
- 2 PASSPORT-SIZED PHOTOGRAPHS
- ICA FORM 16
- ICA FORM V36

EVALUATED BY: _____ DATE: _____
(NAME & SIGNATURE)

CHECKED BY: _____ DATE: _____
(NAME & SIGNATURE)

APPROVED/REJECTED BY: _____ CONDITIONAL OFFER DATE: _____
(NAME & SIGNATURE)

REMARKS: _____

TERMS & CONDITIONS

CONFIDENTIALITY

MISTC is committed to maintaining the confidentiality of the Student's personal information and undertakes not to divulge any of the Student's personal information to any third party without the prior written consent of the Student.

REFUND

Subject to the "Force Majeure" of the student contract, the Student shall be entitled to immediately withdraw from the Course by giving written notice to MISTC of his/her intention to do so under the following circumstances: (1) MISTC fails, for any reason, to commence the Course on the Commencement Date; (2) MISTC fails, for any reason, to complete the Course by the Completion Date; (3) MISTC terminates the Course for any reason prior to the completion of the Course; or (4) MISTC is in material breach of its obligations as stated in the student contract. MISTC shall, as soon as practicable after receiving the Student's notice of withdrawal under the refund policy and force majeure of the student contract (and in any event no more than fourteen (14) days after receiving such notice) refund to the Student the entire amount of the Tuition Fees or any Deposit; and the unconsumed Non-Tuition Fees and/or Additional Fees.

APPLICATION

I hereby apply for the programme stated and membership of the Marketing Institute of Singapore Training Centre. I declare that all information given is true and correct, and agree to give my consent for the institute to disclose any information regarding my application to the relevant government authorities. I also agree to abide by the decision of the institute as to my eligibility for the course and appropriate grade of membership. If accepted, I agree to abide by the Constitution, Rules of the Institute, Code of Ethics, and pay all corresponding programme and membership fees.

Applicant's Signature

Date of Application

DECLARATION

IF YOU ARE COMPANY SPONSORED, PLEASE ENSURE THAT THIS SECTION IS COMPLETED BY YOUR COMPANY. PLEASE NOTE THAT SDF FUNDING IS NOT AVAILABLE FOR POST-GRADUATE PROGRAMMES.

1. The company is willing to finance the applicant. Yes No
2. If this applicant is admitted, it is understood that he/she will not be asked to absent himself/herself from lectures except for serious emergencies.
3. I also understand that accordingly to the Skills Development Levy (Cap 306), company sponsored students are required to obtain at least 75% class attendance for each subject and must sit for all examinations. Otherwise SDF will withdraw the subsidy and our company shall be liable to pay MISTC the amount of the course fees supported by SDF.

Name & Designation of
Company Officer

Signature & Date

Company Stamp

PLEASE SEND COMPLETED FORM TO:



MARKETING
INSTITUTE OF
SINGAPORE
Training Centre

Marketing Institute of Singapore Training Centre

10 Raeburn Park, Block C,
#01-33 / 02-33, Singapore 088702

Tel: (65) 6411 1711 Fax: (65) 6271 8029

Website: www.mis.edu.sg/education