

**THE INSTITUTION OF FIRE ENGINEERS
SINGAPORE (“IFE”)**

**CERTIFICATE OF COMPETENCY
FIRE EXTINGUISHER SERVICING & MAINTENANCE
46th RUN (22 July 2019)**

APPLICATION FORM

I PERSONAL PARTICULARS

Name: _____

Address: _____

Telephone: _____(HP) _____(O) _____ Fax: _____

Citizenship: _____ E-mail: _____

Date of Birth: _____ Gender: _____

II QUALIFICATIONS (Minimum entry level is Secondary 2 Mathematics and Science or possess NITEC/NTC QUALIFICATIONS)

Highest Standard Attained:

Trade Certificate/Diploma/Professional Qualifications:

Qualifications	Date Obtained	Institution
_____	_____	_____
_____	_____	_____
_____	_____	_____

FSM Registration No: (if applicable) _____

III EMPLOYMENT

Name of Present Employer: _____

Address of Present Employer: _____

Company Email Address: _____

Employer Contact Person's name: _____

Appointment/Designation of applicant: _____

Company-sponsored: Yes / No

If company sponsored, all correspondence will be sent to the company's office address.

Please tick correspondence address: () Office or () Home address.

IV PAYMENT

I acknowledge and agree that payment needs to be made to "The Institution of Fire Engineers, (UK)" via crossed cheque together with this application. I acknowledge that my seat will be confirmed **after** payment is received by IFE. Certification will not be sent if payments are not completely received by IFE.

V DECLARATION

I hereby declare that the particulars given in my application are true and correct in every respect. I understand that my application will be disqualified if any information given by me is found to be untrue. The fees paid will then be forfeited.

I accept that the Institution of Fire Engineers reserves the right to accept or reject my application for whatever reason and no refund of fees will be made for withdrawal on or after the commencement of the course for which I have been accepted.

Signature of Applicant

Date

VI *² I confirm that the particulars declared by the applicant in his employment particulars in Part III of this application form is correct and I support his/her application for this course.

Employer's Signature

Company Stamp

**² Employer's signature required if company sponsored.
If company sponsored, all correspondence and the certificate will be sent to company address.*

Please note that the organiser reserves the right to postpone or cancel the course without assigning any reasons.

FOR OFFICIAL USE

The application is accepted for Run No: 46 (July 2019)

Payment received: \$ _____ via Cheque No: _____ (Bank:)

Receipt issued No: _____