



## Student Application Form

FOR OFFICIAL USE ONLY

### IMPORTANT

- 1) Please complete the form in full.
- 2) Applications with incomplete information and/or not accompanied with supporting documents will not be considered.
- 3) Where not applicable, please indicate "N/A" in the blanks.
- 4) Application Fee: Payment of SGD\$420 is to be made payable to "Trinity International College" and must be sent with your completed application form attached with the certified true copies of your certificates and transcripts. This fee is non-refundable.

Affix  
Photo  
Here

Name of Course: \_\_\_\_\_

Course Commencement and Course Completion Date: \_\_\_\_\_

### SECTION 1: APPLICANT'S PARTICULARS

Full Name in BLOCK LETTERS (Underline Surname)		Alias (if any)	
NRIC/FIN Number:		Passport Number (Foreigners)	
Race	Marital Status Single <input type="checkbox"/> Married <input type="checkbox"/>	Nationality	
Date of Birth (DD/MM/YYYY)	Sex Male <input type="checkbox"/> Female <input type="checkbox"/>	Province / State	Country of Birth
Email Address		Occupation	
Residential Address in Singapore (if any)			

### SECTION 2: PARENTS AND/OR STEP PARENTS INFORMATION (FOR STP APPLICANTS ONLY)

Full Name	Relationship	Occupation	Email	Mobile Number

**SECTION 3: SIBLING INFORMATION (FOR STP APPLICANTS ONLY)**

I do not have any information to declare for the below.

Full Name	Relationship	Date of Birth (DD/MM/YYYY)	Nationality	Residential Status in Singapore

**SECTION 4: (A) EMERGENCY CONTACT IN SINGAPORE**

Name	
Relationship to Applicant	
Contact Number	

**SECTION 4: (B) EMERGENCY CONTACT IN HOME COUNTRY (FOR FOREIGNERS ONLY)**

Name	
Relationship to Applicant	
Contact Number	

**Declaration by Applicant**

I declare that all the information provided in this Application Form is complete and correct. I understand that any misrepresentation or omission of information will result in my disqualification from consideration for admission to the College made on the basis of incorrect, incomplete or fraudulent information.

I agree for the College to use my information and photographs in any publicity materials for the College.

I consent to the collection, use and disclosing of personal data by the College for the purpose of processing my application for study, administration and funding purposes (where applicable), subject to the provisions of the Personal Data Protection Act (PDPA). A copy of the College's Policy is available on the College's website at [www.trinitycollege.edu.sg](http://www.trinitycollege.edu.sg).

\_\_\_\_\_/\_\_\_\_\_  
Student/ Parent/ Guardian's Name                      Signature                      Date

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Please send all relevant documents as stated in Section 10, together with the Application Fee to:  
Administration Department  
Trinity International College  
Blk 135, Jurong Gateway Road #04-343/357  
Singapore 600135



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<input type="checkbox"/> Through Agent		<input type="checkbox"/> Direct Sales	
(Agent Code: _____)		Name: _____	
Met Entry Requirements	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Verification of Documents	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Conducted Pre-course Counselling	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Student Pass Application	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Type of Pass <input type="checkbox"/> SC <input type="checkbox"/> PR <input type="checkbox"/> STP <input type="checkbox"/> LTVP <input type="checkbox"/> DP <input type="checkbox"/> SVP <input type="checkbox"/> WP <input type="checkbox"/> S Pass <input type="checkbox"/> EP	Total Course Fees		
No of Installments	Installment Amount		
Remarks			
Pre Course Tuition	Duration		
Commencement Date	Tuition Fee		
Remarks			

**CHECKED BY:**

**Name** : \_\_\_\_\_ **Date** : \_\_\_\_\_  
**Designation** : \_\_\_\_\_ **Signature** : \_\_\_\_\_