

ISCA CPE  
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Singapore 049709

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[cpe@isca.org.sg](mailto:cpe@isca.org.sg) <http://cpe.isca.org.sg>

CCF FUNDING REGISTRATION FORM

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| Registrations must be submitted through a corporate account. Please complete all information required and send it to [cpe@isca.org.sg](mailto:cpe@isca.org.sg) at least 1 month before the course commencement in order for us to process your registration form. |

**COURSE ENROLMENT**

**Yes, I would like to register for the following seminar:**

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| **\*Seminar Code:** | **\*Seminar Title:** | **\*Date(s):** |

\*Please see <http://cpe.isca.org.sg> for seminar information.

# APPLICANT COMPANY’S PARTICULARS

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| --- | --- | --- | --- |
| Company’s Name and UEN Number: | | Company’s Address: | |
| **Contact (if other than Participant)**  Name : | Designation: | Contact No.: | Email: |

# PARTICIPANT’S PARTICULARS

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| --- | --- | --- | --- |
| Participant’s Name (as in NRIC or Passport) (Mr / Ms / Mrs/ Mdm):  (1)  Date Of Birth: | | ISCA Member Yes  No  NRIC/FIN.:       (In full) | ID Type:  (Pink/ Blue NRIC, Employment/ S Pass, Work Permit) |
| Designation: | Contact (HP): | Email: | |
| No. Of Years Of Service With The Charity/ IPC Organisation: | | | |
| Participant’s Name (as in NRIC or Passport) (Mr / Ms / Mrs/ Mdm):  (2)  Date Of Birth: | | ISCA Member Yes  No  NRIC/FIN.:       (In full) | ID Type:  (Pink/ Blue NRIC, Employment/ S Pass, Work Permit) |
| Designation: | Contact (HP): | Email: | |
| No. Of Years Of Service With The Charity/ IPC Organisation: | | | |
| **Eligibility Criteria for CCF Funding**  I/We declare that the Participant is a staff of the Applicant Company (Board members/ staff in key governance and management areas) who have served in the Charities for at least 6 months with an official designation.  I/We declare that the Participant has at least 1 year validity of their work pass at the point of application (if Participant is an Employment Pass or Work Permit holder).  I/We declare that Applicant Company has not applied for other sources of government funding for the course. | | | |

**Payment OF TOTAL FEES** (Corporate Payment) (For payment by credit card, signature of the cardholder & card expiry date required)

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| Please tick (√) mode of payment:  (1) Total Payment (inclusive of GST): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (2)  Visa  MasterCard  *Card Account No.:* \_\_\_\_\_\_\_\_\_ -\_\_\_\_\_\_\_\_\_- \_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ *Name of Cardholder:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Expiry Date (mm/yyyy) :* \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_    *Cardholder’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date (dd/mm/yyyy):* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| (3)  Corporate PayNow | 1. Log in to your mobile banking application. 2. Select “PayNow” and key in ISCA’s Unique Entity Number (UEN): T04SS0109E. 3. Key in the required amount and pay.   Please provide a screenshot of the transaction as proof of payment and send it together with this form to: cpe@isca.org.sg | |

**DECLARATION**

1. I/We declare that the personal profile and information on this form is true and complete, and agree to the terms of ISCA's Privacy & Data Protection Policy available at <http://isca.org.sg/privacy-and-data-protection-policy/>
2. I/We have read, understood and agreed to be bound by the Terms and Conditions for registration: <https://eservices.isca.org.sg/ConfigurationTerms>.
3. I/We understand that the Applicant Company has to make payment for the Nett Course fee (inclusive of GST) prior to the course commencement.
4. If the participant fails to meet at least 75% attendance and/or fails to sit for an assessment or for any other reason where funding is not approved, the Applicant Company / participant is required to reimburse ISCA the funded portion of the course fees.

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| **Authorised Name & Signature:** | **Company Stamp:** |
| **Date:** | |