

## REQUEST FOR STATEMENT OF CERTIFICATION

This form may take you 5 minutes to fill in.

You will need the following information of the participant to fill in the form:

- NRIC no. (for Singaporean and Malaysian only) or passport no. (for other nationalities)
- Date of birth
- Nationality

### Notes:

- There will be no replacement of lost certificate. A course participant who lost his original certificate can request a statement verifying that he has successfully completed the course.
- The statement is only for participants who have successfully completed the relevant courses conducted by BCA Academy.
- Please note that statements not **collected within 3 months after the request date** will be disposed off.

Please tick

### Normal service

A non-refundable search fee of **\$21.40** (with GST) per worker will be charged.

The statement of information would be ready for collection 2 weeks from the date of request.

### Express service

A non-refundable search fee of **\$64.20** (with GST) per worker will be charged.

Applicant may request for this service if applicant needs the information to be available within 3 working days.

The statement of information would be ready for collection on the 3<sup>rd</sup> working day afternoon from the date of request.

\*Please pay by Nets / Cash Card / Credit Card.

### Particulars of Course Participant

Name: \_\_\_\_\_

NRIC / Passport No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

**Statement of Certification For:** (\* Please tick or circle where appropriate)

Course Attended : \_\_\_\_\_

Duration From: \_\_\_\_\_ To: \_\_\_\_\_

Certificate: \*CSC / BSC / SEC / Others

Reasons For Request:

\* Loss of certificate

(Please attach police report)

\* Amendment

(Please attach copy of relevant documents)

### Declaration

I hereby declare that the particulars given above are true and correct in every aspect.

\_\_\_\_\_  
Signature of Course Participant

\_\_\_\_\_  
Date

Statement collected by: Name: \_\_\_\_\_ Contact No.: \_\_\_\_\_ Signature / Date: \_\_\_\_\_

### For Official Use

Payment Collection

Fees paid: \$ \_\_\_\_\_ Received by/Date: \_\_\_\_\_ Invoice No/Date: \_\_\_\_\_

### For Amendment Request Only

Programme Code: \_\_\_\_\_

Receipt/Tax Invoice No.: \_\_\_\_\_

Nationality: \_\_\_\_\_

ENR

CSO

Processed By: \_\_\_\_\_

Checked By: \_\_\_\_\_

Approved By: \_\_\_\_\_

Updated By/Date: \_\_\_\_\_