

## **Declaration Form for Celebration of Learning Programme**

| Name (according to Mohammad Irfan Bin Suhairi Alifi NRIC):                   |                             |
|--|-----------------------------|
| NRIC/ID No: T0422495C  |                             |
| Gender: Male   | DOB: 26/08/2004             |
| Nationality: Singaporean   | Country of Birth: Singapore |
|  |                             |
| Part II  |                             |
| Do you have any criminal record in   | <b>⊿</b> No                 |
| Singapore or overseas?   | ☐ Yes: (details)            |
|  |                             |
|  | <b>-</b>                    |
| 2. Have you ever been, or are you currently                                  | ☑ No □ Year (details)       |
| under investigation by the Police or any other law enforcement agency in     | ☐ Yes: (details)            |
| Singapore or overseas?   |                             |
| N A  |                             |
|  | gync                        |
| 3. Have you been involved in any court                                       | L Mo                        |
| proceedings within Singapore or any other court of law outside of Singapore? | Yes: (details)              |
| court or law outside or singapore:   |                             |
|  |                             |
| 4. Have you had any disciplinary proceedings                                 |                             |
| initiated against you by any organisation                                    | ☐ Yes: (details)            |
| or professional bodies?  |                             |
|  |                             |
| 5. Have you been declared financially  | No                          |
| embarrassed or a bankrupt within the last                                    | ☐ Yes: <i>(details)</i>     |
| 10 years?  |                             |
|  |                             |
| 6. Do you have any substance dependence                                      | <b>⊅</b> No                 |
| issues (i.e. dependence on alcohol, drugs,                                   | ☐ Yes: (details)            |
| etc.), excluding prescriptions by medical                                    |                             |
| professional)?   |                             |
|  |                             |

## Part III

Part I

I understand that the above information ("my Personal Information") will be provided to the Government of Singapore, as represented by the Ministry of Social and Family

3 Mar 2022



Development ("Government" or "MSF"), for the purpose of assessing my suitability to run, manage, provide services or volunteer for the Celebration of Learning Programme.

- 2 I allow the Government to collect, share and use my Personal Information for the purposes in Paragraph 1.
- 3 **[Only applicable for potential and existing volunteers/vendors]** I understand that I may not be engaged as a volunteer/vendor at the Agency or may be re-deployed to other areas of work within the Agency should this form contain any false or inaccurate or incomplete information and/or if MSF assesses that I am unsuitable to provide services as a vendor or volunteer for the Celebration of Learning Programme.
- I declare that the information provided in this form is true and correct and I furnish the information knowing that I may be liable to criminal prosecution if I have stated any information which I know to be false or do not believe to be true.

| Mohammad Irfan   |           |      |
|--|-----------|------|
| Name   | Signature | Date |
| Potential/Existing Volunteer/Vendor (Please strikethrough accordingly) | dsync     |      |

3 Mar 2022 2