

**D) Declaration Form**

I fully understand the purpose of the Ngee Ann Polytechnic (NP) Overseas Programme, the terms and conditions pertaining to the participation of this Overseas Programme and pledge that I:

1. will return to complete my course of studies at NP after my Overseas Programme.
2. will behave with due consideration of others both at work, in shared lodgings (if I happen to share lodgings with others) and in all learning and social activities.
3. will abide by the laws of the host country as well as NP's rules and regulations.
4. will not become involved in any harmful and undesirable activities, or any high risk activity that is beyond the scope of the Overseas Programme for which I may not be covered by NP's insurance policy.
5. will abide by all the rules stated in the safety guidelines and trip pamphlet.
6. will be responsible for my personal safety at all times throughout the trip.
7. will not leave the Overseas Programme without prior approval from appropriate persons in authority (unless there is immediate danger to my life such as in a situation of civil unrest or other emergencies).
8. will follow all instructions given by any appointed staff or personnel during the Overseas Programme.
9. understand that the subsidy I will be receiving has taken into consideration the previous subsidy I have received in any NP Overseas Programme.
10. am able to meet the financial commitments as estimated. I understand that the NP subsidy is to aid in financing the expenses incurred abroad, not to cover them completely.
11. understand that NP reserves the right to retract the subsidy (for Internship) for the Overseas Programme in the event that I should fail to complete or choose to terminate the Overseas Programme before the stipulated completion date. I am prepared to refund any subsidy if I terminate my Overseas Programme.
12. certify that all information supplied in conjunction with my application is correct and true to the best of my knowledge and belief and that I have not willfully suppressed any material facts. I accept that false particulars or willful suppression of facts will render me liable to disqualification and/or to refund the any approved subsidies.
13. declare that all the medical information provided above is true and I do not have any other forms of disability/disabilities or chronic medical ailment which may affect my performance in an overseas environment during the Overseas Programme. I also certify that I do not have any outstanding tuition fees.
14. will pay NP the FULL cancellation charges and expenses incurred if I withdraw or fail to show up for the Overseas Programmes (for non-Internship programmes).

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Name of Applicant

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NRIC / Passport

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Signature of Applicant / Date

**E) INDEMNITY FORM**

**Trip : OVERSEAS COMMUNITY SERVICE PROJECT (YEP)**  
**(Yunnan, China / Hoian, Vietnam )** \*please circle your choice

**To be completed by Parent / Guardian of Applicant**

I, \_\_\_\_\_, NRIC/Passport No. \_\_\_\_\_  
(Name of Parent/Guardian)

being the \_\_\_\_\_ of \_\_\_\_\_  
(Relationship) (Name of Applicant)

1. I agree to let my child / ward participates in the Overseas Community Service Programme.
2. I shall not hold Ngee Ann Polytechnic, the participating organisations i.e. the host, and / or their appointed staff or officials responsible for any mishaps, injury or loss of life that may occur in the cause of, or as a result of my child's / ward's participation in the Overseas Programme.
3. I shall indemnify Ngee Ann Polytechnic, the participating organisations i.e. the host, and / or their appointed staff and officials against any claims by any party for damages or compensation whatsoever, in the event of any illness, injury or death by me / my child / ward named above.
4. I understood the terms and conditions above and the preceding acknowledgements provided in this form.
5. I have also ensured that my child / ward fully understand the same and that all the information provided herein are true.
6. I declare that all the stated information and medical information provided is true to the best of my knowledge

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date