



## Student Particulars Form

This form is to be duly completed by all attachment applicants and return to Human Resource Department.

### **DOCUMENTS REQUIRED FOR STUDENTS**

- 1) Photocopy of NRIC/Passport
- 2) Passport, Student Pass/Training Employment Pass (for foreigners)
- 3) Photocopy of student status letter (For University students - Obtain from Registrar's Office)
- 4) Photocopy of University letter/Offer letter with names of both Institute for Infocomm Research and University supervisors (If applicable)
- 5) Photocopy of Institute/School Pass (Non-University Students)
- 6) Certificate of highest qualification obtained (For foreign students ONLY)

For HR Use:

SAP No : \_\_\_\_\_

Access Card No : \_\_\_\_\_

### **STUDENT ATTACHMENT PERSONAL PARTICULARS**

Family Name (Dr/Mr/Ms)\* : \_\_\_\_\_ Name : \_\_\_\_\_

Gender: ☐ Male ☐ Female

Marital Status: ☐ Single ☐ Married ☐ Others: \_\_\_\_\_

Date of Birth (dd/mm/yyyy): \_\_\_\_\_

Religion: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

Birthplace: \_\_\_\_\_

### **For Singaporean / Singapore PR Student\***

(Identity Card/Passport No)\* : \_\_\_\_\_ Date & Place of Issue: \_\_\_\_\_

For Male Singaporean (Military status): ☐ Reservist ☐ Deferred ☐ Completed NS ☐ Exempted

### **For Foreign Student\***

Foreign Identification Number (FIN)\*: \_\_\_\_\_

Student Pass Expiry Date: \_\_\_\_\_

Home Country Address: \_\_\_\_\_

Address in Singapore: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact No: (Mobile) \_\_\_\_\_ (Home): \_\_\_\_\_

School E-mail: \_\_\_\_\_ Personal E-mail: \_\_\_\_\_

Institution: ☐ NUS ☐ NTU ☐ Polytechnic : \_\_\_\_\_ ☐ Others: \_\_\_\_\_

School/Faculty/Dept: \_\_\_\_\_

Degree of Study: ☐ PhD ☐ MSc ☐ MEng ☐ BSc ☐ BEng  
☐ Postgraduate Diploma ☐ Diploma ☐ Others: \_\_\_\_\_

Candidature Type (for Postgraduate Student): ☐ Full Time ☐ Part Time

Major of Study: \_\_\_\_\_

Attachment Period: From \_\_\_\_\_ To \_\_\_\_\_

Type of Scheme: PG/NJC STAR/MOE A\*STAR JC/IA/FYP/NSS/Others: \_\_\_\_\_

Research/ Thesis / Project Title: \_\_\_\_\_

Capability Group(CG)/Dept/Programme: \_\_\_\_\_

Name of Main Supervisor/Name of RI or Uni: \_\_\_\_\_

Name of Co-Supervisor/Name of RI or Uni: \_\_\_\_\_

#### TO BE COMPLETED BY POST – GRADUATE ONLY

Highest Degree Awarded to Date	
<b>Type of Student</b> (Tick the most appropriate one)	<input type="checkbox"/> Scholarship (AGA)
	<input type="checkbox"/> Higher degree students trained through research programs related to RI research as part of local collaborations
	<input type="checkbox"/> Joint Labs / Centers
	<input type="checkbox"/> By the RI as supervised (or co-supervised) by a staff of the RI only and not part of any collaboration (Note this is purely supervision on project related to RI work)
	<input type="checkbox"/> Students doing professional Masters Project at RI e.g. as part of the coursework
	<input type="checkbox"/> Singapore – MIT Alliance (SMA)
	<input type="checkbox"/> Others (e.g. EDB, company, self funded etc.) please state: _____
School Supervisor/Faculty/Dept:	
RI Supervisor/Faculty/Dept:	

HR/Student/v1.0

Last Updated: May 2011

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**EMERGENCY CONTACTS (Next of Kin)**

	Contact 1	Contact 2
Name		
Relationship		
Telephone Contact	(Mobile) _____ (Home) _____	(Mobile) _____ (Home) _____
Address		

**DECLARATION BY STUDENT**

I agree that the entire contents of this registration form may be used by the company in whatever manner it may wish.

I declare that the above information are true and to the best of my knowledge and belief, and that I have not willfully suppressed any material facts.

I understand that any false answers or statement made by me or any supplement thereto, or in connection with the above investigation, will be sufficient grounds for immediate termination of my services.

Acknowledged by:

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

**Note: Please update HR if there are any changes in the above information**

## Appendix A

### BANK ACCOUNT DETAILS (ONLY FOR STUDENT RECEIVING STIPEND)

	1 <sup>st</sup> time application <input type="checkbox"/>	Change of bank details <input type="checkbox"/>
Name as in Bank account		
Name of Bank		
Branch Name		
Address of Bank		
Bank Account Number	*Savings / Autosave / Current Account	

**\*Please attach a copy of the bank account details.**