

FORM S1

This form must be submitted when there are changes to employment or personal particulars details. You are also required to update us via http://www.askadmissions.nus.edu.sg/app/utlis/login_form/redirect/ask in January every year, stating your full name and matriculation number in the email. Please complete this form digitally before printing and endorsement.

PART 1: PERSONAL PARTICULARS

Please note that you are to remain contactable while serving the bond.

Name (as in NRIC / Passport): _____

Undergraduate Matric/Student No.: _____ Gender: _____
 (e.g. U012345X/A0012345X)

Birth Date (dd/mm/yyyy): _____ Nationality: _____

Passport/Identification No.: _____ FIN/NRIC No.: _____

Date Acquired Singapore Permanent Residence (if applicable): _____

Type of Scholarship: _____

Year Admitted to NUS: _____ Conferment Date (dd/mm/yyyy): _____

Permanent Mailing Address in Home Country (please include province, if applicable and postal code):

 _____ Postal Code: _____

Mailing Address in Singapore (except NUS hostel):

 _____ Postal Code: _____

Tel No. : _____ Handphone No: _____

Personal Email (except NUS email address): _____

Please tick the relevant box below. If you are not currently serving your scholarship bond, please indicate the reason below.

I am currently

☐ **serving my scholarship bond** and have completed Part 2 of this form.

☐ **not serving my scholarship bond because** _____

 Signature

 Date (dd/mm/yyyy)

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PART 2: CURRENT EMPLOYMENT DETAILS

Please leave this portion blank if you are not currently serving your scholarship bond.

(I) PARTICULARS OF EMPLOYMENT

Date: _____

To whom it may concern

This is to certify that _____ **<Name>**, holder of
FIN/ NRIC _____, has been employed on a full-time basis by our company
since _____ **<DD/MM/YYYY, Start Date of Employment>**.

For further clarification, please contact _____ **<Name of Contact Person>**
at _____ **<Contact No.>** or _____ **<Company's Email>**.

Thank you.

Yours faithfully,

Signature of Authorised Personnel (e.g. Director/ HR Officer)

Name: _____

Designation: _____

Company Stamp ((bearing company's name & logo): _____