



AEG INTERNATIONAL COLLEGE

134 Jurong Gateway Road, #04-307C Singapore 600134

Website: www.aegcollege.edu.sg

Tel: +65 80498405 | Email: info@aegcollege.edu.sg

REGISTRATION FORM

This information you have provided will be kept confidential & used solely for communicating with you.

Course

Course Applying: _____

Course Period: _____

Course Fees: _____

Mode: _____

Full Time / Part Time

Personal Details

Applicant's Name: _____

Passport No: _____

Expiry Date of Passport: _____

NRIC/FIN No: _____

Date of Birth: _____

Sex: _____

Marital Status: _____

Religion: _____

Citizen: _____

Hand Phone: _____

Home Phone: _____

Email Address: _____

Home Address: _____

Singapore Address: _____

In Case of Emergency

Father/Mother _____

Contact No: _____

Brother/Sister: _____

Contact No: _____

Other Name: _____

Contact No _____

Relationship with Applicant: _____



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Education Background

Name of School	Language of Instruction	From (dd/mm/yy)	To (dd/mm/yy)	Country	Highest Educational Qualification

Employment History

Name of Company	Position Held	From (dd/mm/yy)	To (dd/mm/yy)	Country	Nature of Duties

Applicant's Checklist

- ☒ Completed Application Form
- ☒ Certified copies of certificate and transcript
- ☒ Copy of Passport / NRIC
- ☒ 2 Passport Size Photos
- ☒ Payment of S\$150 Application Fees (Non-Refundable)

Declaration

I, _____ declare that all information given by me in this registration form are true and correct and I understand that any misinterpretation or omission of information is sufficient grounds for rejecting my application. I also authorize any investigation of the above information for the purpose of verification. While I am a Student, I undertake to observe all the statutes, By-Laws and Rules of the School.

Applicant Signature: _____

Date : _____

For Office Use only

Application Outcome: ☒ Approved

☐ Rejected

Letter of Offer: ☐ Conditional/Provisional

☒ Unconditional

Academic Advisor's Signature and Date