

IMPORTANT

Your decision letter from Immigration & Checkpoints Authority would be posted to you by registered mail to the address below. It is important that you update our office should there be any changes to the address.

Correspondence Address :

PROCESSING FORM

All columns of the form should be completed.
Please indicate "Nil" or "NA" (Not Applicable) where appropriate.

I PERSONAL PARTICULARS OF APPLICANT

Identity Card Number:	Passport Number:
Name : Dr/Mr/Mrs/Mdm/Miss/Prof/Ms*	
Contact Numbers	
Home Tel No.:	Office Tel. No.:
Handphone No.:	Pager No.:
Fax No.:	E-mail Address:
Marital Status: Single /Married/ Divorced/ Widowed/ Separated*	
Sex: MALE / FEMALE *	Date of Birth (DD/MM/YY):
Nationality:	Race:

* Please delete where appropriate

II EDUCATIONAL QUALIFICATIONS (Starting from highest qualification)

Duration of Studies		Qualification	Institution/ Country
From	To		

III EXISTING MEMBERSHIP OF PROFESSIONAL AND SOCIAL ORGANISATIONS

Year Joined	Type of Membership	Location/Country	Name of Professional Body or Social Organisation

IV WORK EXPERIENCE (Starting from current job, please attach additional sheet if space is insufficient)

Period of Employment		Employer/Country	Position** (Please state job responsibilities)	Basic Monthly Salary S\$ Not including commissions & allowances Please state exchange rate used
From (Mth/Yr)	To (Mth/Yr)			

** Computer professionals are requested to state their experience with the type of O/S, program languages, mainframe, etc.

INDUSTRY OF CURRENT EMPLOYMENT

Please tick the appropriate box

SERVICE

- Accounting Firms
- Aerospace / Aeronautical Services
- Architects & Planners
- Banking & Finance / Insurance Companies
- Building Services
 - Property Consultants/ Developers
 - Building Contractors
 - Building Maintenance
- Creative Services
 - Advertising & Promotions
 - Exhibition & Convention
 - Media, Film/ Video Services
 - Public Relations
- Engineering Firms
- Government Organisations/ Statutory Boards/ Government Holding Companies
- Hospitality Services
 - Hotels
 - Restaurants
- Information Technology
- Legal Services
- Leisure & Entertainment
- Management Consultancy
- Medical, Dental & Pharmaceutical Services
 - Clinics
 - Hospitals
- Ship Repair/ Shipyard
- Surveyors & Valuers

- Telecommunication Services
- Tertiary Institutions/ Educational & Training Centres
- Trading Services
 - Retail
 - Wholesale
- Transport & Storage Services
 - Airlines
 - Aircargo/ Freight forwarding
 - Courier Services
 - Shipping
- Other Services; please specify:

PRODUCTS

- Food & Beverage
- Apparel, Textile, Footwear & Related Products
- Furniture & Wood Products
- Petroleum/ Petrochemical & Chemical Products
- Machine Tools & Industrial Machinery
- Metal Products
- Pharmaceutical & Healthcare Products
- Plastic & Rubber Products
- Precision Engineering Products
 - Precision Engineering Components
 - Precision Machinery & Equipment
 - Precision Metal Working
 - Precision Plastic Processing
 - Precision Rubber Processing
 - Surface Treating/ Finishing
- Printing & Paper Products
- Transport Equipment
- Other Products; please specify:

V LEISURE ACTIVITIES

Please tick appropriate box(es)

<input type="checkbox"/>	Arts & Crafts	<input type="checkbox"/>	Audio/Video	<input type="checkbox"/>	Gardening
<input type="checkbox"/>	Golf	<input type="checkbox"/>	Motoring	<input type="checkbox"/>	Racket Games
<input type="checkbox"/>	Reading	<input type="checkbox"/>	Sea Sports	<input type="checkbox"/>	Travel
<input type="checkbox"/>	Others; please specify				

VI FAMILY PARTICULARS

A Spouse

1 Is spouse applying for Singapore Permanent Residence? YES / NO*

2 SPOUSE'S PERSONAL PARTICULARS

Name: Dr/Mr/Mrs/Mdm/Miss/Prof/Ms*		
Date of Birth (DD/MM/YY):	Nationality:	Race:

3 SPOUSE'S EDUCATIONAL QUALIFICATIONS (Starting from highest qualification)

Duration of Studies		Qualification	Institution/ Country
From	To		

4 SPOUSE'S MEMBERSHIP OF PROFESSIONAL AND SOCIAL ORGANISATIONS

Year Joined	Type of Membership	Location/Country	Name of Professional Body or Social Organisation

5 SPOUSE'S WORK EXPERIENCE (Starting from current job, please attach additional sheet if space is insufficient)

Period of Employment		Employer/Country	Position** (Please state job responsibilities)	Basic Monthly Salary S\$ Not including commissions & allowances Please state exchange rate used
From (Mth/Yr)	To (Mth/Yr)			

** Computer professionals are requested to state their experience with the type of O/S, program languages, mainframe, etc.

6 SPOUSE'S LEISURE ACTIVITIES

Please tick appropriate box(es)

<input type="checkbox"/>	Arts & Crafts	<input type="checkbox"/>	Audio/Video	<input type="checkbox"/>	Gardening
<input type="checkbox"/>	Golf	<input type="checkbox"/>	Motoring	<input type="checkbox"/>	Racket Games
<input type="checkbox"/>	Reading	<input type="checkbox"/>	Sea Sports	<input type="checkbox"/>	Travel
<input type="checkbox"/>	Others; please specify				

B Children

1

Name of Child:		Date of Birth (DD/MM/YY):
Sex: MALE / FEMALE *		Nationality:
Applying for Singapore Permanent Residence? YES / NO *		
Educational Particulars:		
Year	Highest Grade Attained/ Present Grade	Name of School

2

Name of Child:		Date of Birth (DD/MM/YY):
Sex: MALE / FEMALE *		Nationality:
Applying for Singapore Permanent Residence? YES / NO *		
Educational Particulars:		
Year	Highest Grade Attained/ Present Grade	Name of School

3

Name of Child:		Date of Birth (DD/MM/YY):
Sex: MALE / FEMALE *		Nationality:
Applying for Singapore Permanent Residence? YES / NO *		
Educational Particulars:		
Year	Highest Grade Attained/ Present Grade	Name of School

4

Name of Child:		Date of Birth (DD/MM/YY):
Sex: MALE / FEMALE *		Nationality:
Applying for Singapore Permanent Residence? YES / NO *		
Educational Particulars:		
Year	Highest Grade Attained/ Present Grade	Name of School

5

Name of Child:		Date of Birth (DD/MM/YY):
Sex: MALE / FEMALE *		Nationality:
Applying for Singapore Permanent Residence? YES / NO *		
Educational Particulars:		
Year	Highest Grade Attained/ Present Grade	Name of School

- Please delete where appropriate