

We're excited to hear that you are interested in exploring sponsorship opportunities with KTPH & YCH. Please follow the following application process:

1. Complete **ALL** fields in the Application Form. This form should take about 15 minutes to complete.
2. Please prepare and scan the following Supporting Documents:
 - i. Curriculum Vitae (if any);
 - ii. Education Certification / Testimonials (if any);
 - iii. Academic Result / Transcript for **your current** and **past courses** of study (eg. N Level, O Level, A Level, NITEC, Higher NITEC, Diploma, Degree);
 - iv. School Admission Letter for your current course of study;
 - v. Pre-admission Medical Report
3. Email the completed Application Form and Supporting Documents (**soft-copy**) to ktp.careers@nhghealth.com.sg.
4. For any enquiries, please contact us at ktp.careers@nhghealth.com.sg.

IMPORTANT:

- Please ensure that **ALL** sections of the application form are completed and in accuracy before submission of application. We reserve the right to reject any incomplete application.

SPONSORSHIP APPLICATION FORM

HOW DID YOU KNOW ABOUT THIS SPONSORSHIP?

- [] Online sources (Website / social media) Please state which source _____
- [] Clinical Attachment: Please state ward and period _____
- [] Friends/Referral. Name: _____ Staff ID/ Student's last 4 digit of NRIC: _____
Institution: _____
- [] Career Talks/Fairs: Please state location and date of career talk/fair: _____

PREFERENCE FOR SPONSORING INSTITUTION

- [] Khoo Teck Puat Hospital [] Yishun Community Hospital
- [] Open to either

PERSONAL PARTICULARS AND FAMILY (*delete where inapplicable)

Personal Particulars collected for administrative purposes only.

Full Name (as in NRIC/Passport. Please underline surname)				
Address				
				Postal Code ()
Contact Number:		Email:		
Residential Status: Singaporean/ Singapore PR/ Other Others (Please specify):				
In case of emergency				
Contact Person:		Contact No.:	Relationship:	
EDUCATION (Please state in chronological order, including courses currently taking) (Please attach certificates, transcripts, results)				
School/Institution Name/Country	From dd/mm/yy	To dd/mm/yy <small>*Indicate estimated graduation date for current course</small>	Course/Major	Highest Standard Passed (Certificate/Diploma/Degree) <small>*Indicate highest qualification when completed current course</small>
EMPLOYMENT HISTORY				
Name of Employer	Job Title	Period of Employment	Job Responsibilities	
IT LITERACY SKILLS				
Microsoft Word <input type="checkbox"/>	Microsoft Excel <input type="checkbox"/>	Microsoft PowerPoint <input type="checkbox"/>	Microsoft Access <input type="checkbox"/>	Others: _____
NATIONAL SERVICE				
Completed National Service: Yes / No / Not Liable / Exempted		Enlistment Date	ORD Date	NS Status:

AWARDS AND ACHIEVEMENTS			
Organisation	Year Received	Awarded By	Awards/Achievements
CO-CURRICULAR ACTIVITIES			
Institution	Year	Position Held	CCA Activities
HOBBIES / INTERESTS			
DECLARATIONS (please delete as appropriate)			
1. Do you have any medical conditions or physical impairment (such as hypertension, diabetes, heart disease, mental illness, deafness, infectious disease e.g. Hepatitis B, etc)? If yes, please specify:			Yes / No
2. Do you have any obligation to your present Company in terms of bond, study loans, etc.? Yes / No If Yes, please give details:			Yes / No
3. Have you been ever detained by any other government law enforcement institution? If yes, please give details:			Yes / No
4. Have you ever been convicted in a Court of Law in any country? If yes, please give details:			Yes / No
5. Have you ever been declared a bankrupt? If yes, please give details:			Yes / No
6. Do you smoke?			Yes / No
7. Do you have any relatives/friends currently employed by KTPH & YCH? If yes, please give details.			Yes / No
Name	Relationship	Department	Job Title
<p>I understand that any false statement made by me on this application or any supplement thereto will be sufficient for disqualification of the application. The willful suppression of any material fact will be similarly penalised.</p> <p>I hereby give consent to KTPH & YCH for the collection, use and disclosure of my personal data for purpose of evaluating my suitability for sponsorship and subsequently for purpose of maintaining the relationship if I am appointed.</p>			
_____			_____
Signature of Applicant			Date

We regret to inform that only shortlisted candidates will be notified within 2 weeks from date of submission of application.