



Photograph

**Student Application Form  
(International Students)**

INTERNATIONAL DIRECT

Student's Name: \_\_\_\_\_

INTERNATIONAL LOCAL TRANSFER

Intake Month / Year: \_\_\_\_\_

Request for exemptions with highest qualifications?  YES  NO

The complete application package should be returned to: **Kaplan Higher Education Academy Pte Ltd**  
Kaplan City Campus @ Wilkie Edge, 8 Wilkie Road, #02-01, Singapore 228095  
OR SCAN and EMAIL to [apply.sg@kaplan.com](mailto:apply.sg@kaplan.com) to the respective **Country Manager/Programme Consultant**

**Language Programmes**

Diploma in Professional Business English Programme (PBEP) Level: \_\_\_\_\_

**Foundation Programmes**

Foundation Diploma  
 Preparatory Course for Singapore-Cambridge General Certificate of Education (Ordinary Level) Examination  
• *Optional Additional Subjects (Circle as appropriate): Chinese/Geography\*/ Not Taking Up*

*\*Subject to class availability*

**Kaplan Higher Education Academy Diploma Programmes**

**Diploma in Commerce**

Business Administration  Finance & Banking  General Studies  Hospitality & Tourism Management  Human Resource Management  
 Marketing Management  Logistics & Supply Chain Management

**Diploma in**

Accountancy  Business & Information Management  Business and Law  Computer Forensics  Counselling  Digital Marketing  
 Events Management  Information Technology  Legal Studies  Mass Communication  Psychology

**Partner University Degree Programmes (Please also fill in the University Application Forms)**

**Murdoch University, Australia**

Bachelor of Arts (Please specify major: \_\_\_\_\_)  
 Bachelor of Business (Please specify major: \_\_\_\_\_)  
 Bachelor of Science (Please specify major: \_\_\_\_\_)  
 Graduate Certificate in Business Administration  
 Master of Business Administration

**Northumbria University, UK**

Bachelor of Arts (Honours) (Top-up) (Please specify major: \_\_\_\_\_)  
 Master of Science (Please specify major: \_\_\_\_\_)

**Royal Holloway (University of London), UK**

Bachelor of Science (Honours) (Top-up) (Please specify major: \_\_\_\_\_)

**University College Dublin, Ireland**

Bachelor of Business Studies (Honours) (Top-up) (Please specify major: \_\_\_\_\_)  
 Master of Science (Please specify major: \_\_\_\_\_)

**University of Essex, UK**

Bachelor of Science (Honours) (Top-up) (Please specify major: \_\_\_\_\_)

**University of Portsmouth, UK**

Bachelor of Arts (Honours) (Top-up) (Please specify major: \_\_\_\_\_)  
 Bachelor of Science (Honours) (Top-up) (Please specify major: \_\_\_\_\_)

**Other Programmes:**

University/Institution: \_\_\_\_\_

Programme Name: \_\_\_\_\_



<b>C. Applicant's Siblings (If applicable)</b>					
Full Name (as in travel document)	Relationship:	Nationality	Residential Status in Singapore (Please tick appropriately):		Occupation
	Date of Birth: (DD / MM / YY)		<input type="checkbox"/> Singapore Citizen/Permanent Resident NRIC: _____	<input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass/etc) FIN No.: _____	
Full Name (as in travel document)	Relationship:	Nationality	Residential Status in Singapore (Please tick appropriately):		Occupation
	Date of Birth: (DD / MM / YY)		<input type="checkbox"/> Singapore Citizen/Permanent Resident NRIC: _____	<input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass/etc) FIN No.: _____	
Full Name (as in travel document)	Relationship:	Nationality	Residential Status in Singapore (Please tick appropriately):		Occupation
	Date of Birth: (DD / MM / YY)		<input type="checkbox"/> Singapore Citizen/Permanent Resident NRIC: _____	<input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass/etc) FIN No.: _____	
Full Name (as in travel document)	Relationship:	Nationality	Residential Status in Singapore (Please tick appropriately):		Occupation
	Date of Birth: (DD / MM / YY)		<input type="checkbox"/> Singapore Citizen/Permanent Resident NRIC: _____	<input type="checkbox"/> Resident (Long Term Pass/Work Pass/Dependent Pass/etc) FIN No.: _____	

**3. Education and Qualification – in chronological order from Secondary/High School**  
**(Native and English translated certified copies of proof must be attached.)**

Name of School	Country	State/Province	Language of Instruction (eg. English, Chinese)	Period of Study		Highest Educational Qualification Academic/Professional (If Honours degree, please state class/division)
				From (DD / MM / YY)	To (DD / MM / YY)	

**4. Applicant's Employment – in chronological order (If applicable)**

Name of Company	Country	Employment Period		Position Held	Nature of Duties
		From (DD / MM / YY)	To (DD / MM / YY)		

**5. Applicant's Financial & Support Details (to be completed by applicant from Visa-required Countries)**

Applicant's Name	Monthly Average income for past 6 months:	Applicant's Spouse Name	Monthly Average Income for past 6 months:
	Current Savings (eg. Fixed Deposit):		Current Savings (eg. Fixed Deposit):
Applicant's Father Name	Monthly Average income for past 6 months:	Applicant's Mother Name	Monthly Average Income for past 6 months:
	Current Savings (eg. Fixed Deposit):		Current Savings (eg. Fixed Deposit):
Other Financial Support from Immediate Family Members:			
<input type="checkbox"/> Yes (Please provide details on a separate sheet) <input type="checkbox"/> No			

## 6. Confidentiality Clause

This information you have provided will be treated with strictest confidentiality and in accordance to the Kaplan Privacy Policy (<http://www.kaplan.com.sg/about/privacy-policy/>). By signing this form, you give consent to our use of your information.

## 7. Refund Policy

### 1. Refund for Withdrawal Due to Non-Delivery of Course:

The PEI will notify the Student within three (3) working days upon knowledge of any of the following:

- i. It does not commence the course on the Course Commencement Date
- ii. It terminates the Course before the Course Commencement Date
- iii. It does not complete the Course by the Course Completion Date
- iv. It terminate the Course before the Course Completion Date
- v. It has not ensured that the Student meets the course entry or matriculation requirement as set by the organisation stated in Schedule A within any stipulated timeline set by CPE; or
- vi. The Student's Pass Application is rejected by Immigration and Checkpoints Authority (ICA)

The Student should be informed in writing of alternative study arrangements (if any), and also be entitled to a refund of the entire Course Fees and Miscellaneous Fees already paid should the Student decide to withdraw, within seven (7) working days of the above notice.

% of [the amount of fees paid under schedules B and C]	If student's written notice of withdrawal is received
[100%]	More than [60] days before the course commencement date
[70%]	Before, but not more than [60] days before the course commencement date
[30%]	Before, but not more than [30] days before the course commencement date
[10%]	Before, but not more than [7] days before the course commencement date
[0%]	On or after the course commencement date

### 2. Refund for Withdrawal Due to Other Reasons:

If the Student withdraws from the course for any reasons other than those stated I (i) to (vi), the PEI will, within seven (7) working days of receiving the Student's written notice of withdrawal, refund to the Student an amount based on the refund table.

### 3. Refund During Cooling-Off Period:

The PEI will provide the Student with a cooling-off period of seven (7) working days after the date that the Contract has been signed by both parties. The Student will be refunded the highest percentage (stated in the refund table) of the fees already paid if the Student submits a written notice of withdrawal to the PEI within the cooling-off period, regardless of whether the Student has started the course or not.

In the event that a student wishes to withdraw from the course, the application fee and administrative fee are not refundable. Students are liable to pay (where applicable) fees that are imposed by the government authorities or other external partners.

For more information on Fee Protection Scheme and refund policy, please refer to [www.cpe.gov.sg](http://www.cpe.gov.sg)

## 8. Pre-Course Counselling Checklist

I confirm I have been advised on/provided information of the following. Please tick(✓) or indicate "NA" if not applicable, in the box next to each item.

SECTION A: PROGRAMME & SCHOOL INFORMATION	
	School Information - Kaplan Higher Education Academy location, campus facilities and infrastructure and accreditation
	Course Information - Name of award, Awarding Body, Course Structure, Intake, Course Duration, Outlines
	Entry Requirements
	Counselling and Student Support service available
SECTION B: INTERNATIONAL STUDENT	
	Student pass application, procedures and documents required as well as the rules & regulations governing the issuance of a student pass.
	Advice on medical check-up, etc.
	Advice on personal and medical insurance
	Information on Singapore - relevant immigration rules and relevant laws of Singapore
SECTION C: FEES PAYABLE AND PAYMENT METHODS	
	The tuition fees, non-tuition fees and any other relevant fees payable to Kaplan Higher Education Academy.
	The payment modes and methods acceptable by Kaplan Higher Education Academy, including available instalment schemes where applicable, and that all payments must be made to Kaplan Higher Education Academy only.

	Advisory Note and Student Contract has to be signed and dated before payment can be made.
<b>SECTION D: FEE PROTECTION SCHEME AND STUDENT CONTRACT</b>	
	The Fee Protection Scheme (FPS) that Kaplan Higher Education Academy has in place for students.
	Both local and international students enrolled into Kaplan are covered under Lonpac Insurance. The scheme covers course fees including GST. A copy of Certificate of Insurance (COI) will be given to students. It contains information such as ID/FIN Number, course title and duration, premium paid, amount insured and period of coverage.
	The Terms & Conditions stated in the Student Contract have been explained and fully understood by the student.
<b>SECTION E: MEDICAL INSURANCE DECLARATION</b>	
	Student has been briefed on the Medical Insurance.
<b>SECTION F: COMMITTEE FOR PRIVATE EDUCATION (CPE) IS PART OF SKILLSFUTURE SINGAPORE (SSG)</b>	
	Established under the Private Education Act, CPE is a statutory board empowered with the legislative power to regulate the private education sector. In addition to its role as the sectoral regulator of private education institutions, the Committee facilitates capability development efforts to uplift standards in the local private education industry.  For more information please visit the CPE website at <a href="http://www.cpe.gov.sg">www.cpe.gov.sg</a> .
<b>SECTION G: WITHDRAWAL/REFUND/TRANSFER POLICY AND PROCEDURE</b>	
	Kaplan Higher Education Academy Refund Policy and Procedures
	Kaplan Higher Education Academy Transfer/Withdrawal Policy and Procedures
<b>SECTION H: FOR STUDENTS ON SVP, LTVP, EP, WP &amp; DEPENDENT PASS</b>	
	ICA, MOM or the relevant authority issues the various passes for valid stay of foreigners. It is the student's responsibility to ensure that he has a valid pass to remain in Singapore during the course of his/her study.
	In the event that the student does not have a valid pass to attend any part of the course, there will be no refund of course fees, and the student may not fulfill the requirement of course completion, thus not being able to complete the course enrolled.

**9. Application Document Checklist (please tick(√) or indicate "NA" if not applicable, in the box next to each item)  
The completed application form must be accompanied by the following items:**

	Copy of Passport (page with personal details) and notarised copies of <u>Birth Certificate</u> & <u>Family Card</u> if applicable. (Native & English translated)
	Certified copies of diploma, certificate and transcripts (Native and English translated language)
	Application Fee - S\$492.20 (inclusive of GST; non-refundable) <b>Please provide *Proof of Payment for Telegraphic and/or Bank transfers</b>
	Passport-sized photographs (on WHITE background)

**10. Updates from Kaplan**

<p>I agree to receive marketing and promotional updates from Kaplan via:</p> <p><input type="checkbox"/> SMS                                      <input type="checkbox"/> Phone                                      <input type="checkbox"/> Email</p> <p>To be completed by students above 18 years old: I agree to allow my parents to receive my academic performance from Kaplan upon request. <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
--

<p align="center"><b>Payment Methods &amp; Payable Account Details</b></p> <p>Fees are payable by Cash, Cheque (Singapore Banks), NETS, Visa/Master/AMEX cards, Flywire and Telegraphic Transfer.</p> <p>For payment by <b>cheque(s)</b>, please make payable to <b>Kaplan Higher Education Academy Pte Ltd</b>.</p> <p>For overseas remittances through <b>Flywire</b>, please make payment via <a href="http://www.pay.kap.sg">www.pay.kap.sg</a> (Programme fee only)</p> <p>For payment by <b>Telegraphic Transfer</b>, you may refer below for the bank account information.</p> <table> <tr> <td>Bank Name</td> <td>: DBS Bank</td> </tr> <tr> <td>Bank Address</td> <td>: 6 Shenton Way, DBS Building, Singapore 068809</td> </tr> <tr> <td>Beneficiary's Name</td> <td>: Kaplan Higher Education Academy Pte Ltd</td> </tr> <tr> <td>Account Number/ Swift Code</td> <td>: 001-900452-7 / DBSSSGSG</td> </tr> <tr> <td>Beneficiary's address</td> <td>: 1 Selegie Road #06-01, PoMo, Singapore 188306</td> </tr> </table>	Bank Name	: DBS Bank	Bank Address	: 6 Shenton Way, DBS Building, Singapore 068809	Beneficiary's Name	: Kaplan Higher Education Academy Pte Ltd	Account Number/ Swift Code	: 001-900452-7 / DBSSSGSG	Beneficiary's address	: 1 Selegie Road #06-01, PoMo, Singapore 188306
Bank Name	: DBS Bank									
Bank Address	: 6 Shenton Way, DBS Building, Singapore 068809									
Beneficiary's Name	: Kaplan Higher Education Academy Pte Ltd									
Account Number/ Swift Code	: 001-900452-7 / DBSSSGSG									
Beneficiary's address	: 1 Selegie Road #06-01, PoMo, Singapore 188306									

**Declaration:**

Have you ever been refused entry into or deported from any country, including Singapore? YES / NO

Have you ever been convicted by a court of law in any country, including Singapore? YES / NO

Have you ever been prohibited from entering Singapore? YES / NO

Have you ever entered Singapore using a different Passport or Name? YES / NO

IF any of the answer is "YES", please furnish details on a separate sheet of paper

**I hereby declare that the information I have provided on this form is true and factual. I also authorise Kaplan to seek the necessary verification from the awarding institutions with regards to my qualifications. I will comply with all the conditions, refund policy, rules and regulations of Kaplan Higher Education Academy Pte Ltd, the University and the Immigration and Checkpoints Authority of Singapore.**

Applicant's Full Name:	Name and Intake of Course Applied For:
------------------------	--

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Note: For students below 18 years old, the parent/guardian will be required to sign the Student Contract upon approval of application to confirm acceptance of offer subsequently.

<b>For Enrolment Office Use</b>	
Remarks: _____	
Name of verifying personnel/ Designation: _____	
_____ Signature	_____ Date

Please provide the following details

## STUDENT INFORMATION/UPGRADER/REFERRAL FORM

<b>Course Name and Awarding University/Institution:</b>	<b>Intake No.</b>
<b>Full Name</b> (as it appears on passport/identity card):	
<b>NRIC/Passport/FIN No.</b>	
<b>Contact No:</b>	

Fill in the following if you are:

<input type="checkbox"/> <b>An existing Kaplan Student</b>	Programme and Awarding University/Institution:	
	Intake No:	Contact No:
<input type="checkbox"/> <b>Referred by a Kaplan Official Student Recruitment Agent</b>	Name of Agency:	
	Specific Agent Email ( <i>for receipt of document on behalf of students</i> ):	
	Contact No:	
<input type="checkbox"/> <b>Referred by a Kaplan Existing Student or Alumni</b>	Programme and Awarding University/Institution:	
	Full Name of Student:	CT No:
	Intake No:	Contact No:
<input type="checkbox"/> <b>I am a new student and was not referred to Kaplan by an existing student or recruitment agent.</b>		

### Declaration:

I hereby declare that the information I have provided on this form is true and factual. I also authorise Kaplan to seek the necessary verification from the awarding institutions with regards to my qualifications. I will comply with all the conditions, refund policy, rules and regulations of Kaplan Higher Education Academy Pte Ltd, the University and the Immigration and Checkpoints Authority of Singapore.

---

 Applicant Signature

---

 Date

Note: For students below 18 years old, the parent/guardian will be required to sign the Student Contract upon approval of application to confirm acceptance of offer subsequently.

# International Application Form



**Personal Details**

Title \_\_\_\_\_ Male (M) Female (F) \_\_\_\_\_ Date of Birth \_\_\_ / \_\_\_ / \_\_\_

Surname/Family Name: \_\_\_\_\_ First/Given Name: \_\_\_\_\_

Home address/Correspondence address: \_\_\_\_\_  
 \_\_\_\_\_

Postal/Zip code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone (Including country code): \_\_\_\_\_ Mobile number: \_\_\_\_\_

Email address: \_\_\_\_\_

**Course you wish to apply for**

Course title	Mode of study (Full time/Part time)

**Further Details**

Country of permanent residence: \_\_\_\_\_ Country of birth: \_\_\_\_\_

Who is paying your fees?      Myself/Family      Fed Aid  
 An official sponsor (state name of organization) \_\_\_\_\_

**Criminal convictions** If you have a relevant criminal conviction, tick the box.

**Disability/Special needs** If you have a disability or special needs, tick the box.

**English Language Proficiency**

Was English the language of instruction in your previous institution?    Yes    No    Partly

Number of years you have studied in English: \_\_\_\_\_ Which institution: \_\_\_\_\_

I hold the following qualifications:

IELTS Score (if known): \_\_\_\_\_ Date of test: \_\_\_/\_\_\_/\_\_\_ Location: \_\_\_\_\_

TOEFL Score (if known): \_\_\_\_\_ Date of test: \_\_\_/\_\_\_/\_\_\_ Location: \_\_\_\_\_

Others (Please specify): \_\_\_\_\_ Date of test: \_\_\_/\_\_\_/\_\_\_ Location: \_\_\_\_\_

If test is yet to be completed, please state date to be taken: \_\_\_/\_\_\_/\_\_\_ Location: \_\_\_\_\_

IELTS      TOEFL      Other: \_\_\_\_\_      Results date: \_\_\_\_\_



**Employment History**

Name of Employer/Organization	Nature of work	From MM/YY To MM/YY	Part time/Full time

**School/College and University Education (From Secondary Education, starting with the most recent)**

From MM/YY To MM/YY	Institution	Qualification	Part time/Full time

**Please indicate how you came to know about this programme.**

- Newspaper: \_\_\_\_\_  Brochure mailer  Internet  Others: \_\_\_\_\_
- From our student: Name: \_\_\_\_\_ Programme: \_\_\_\_\_ Intake No: \_\_\_\_\_ Contact No: \_\_\_\_\_

**Declaration**

I hereby declare that the information that I have provided on this form is true and factual. I also consent to the release of academic results for each programme to Kaplan Higher Education Academy. I agree to meet all financial obligations to Kaplan Higher Education Academy in full and by the due date provided to me and understand that I will not be allowed to enrol or graduate if I fail to do so.

I will comply with all conditions, rules and regulations of Kaplan Higher Education Academy (as stated in <http://www.kaplan.com.sg> and programme brochure/handbook).

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_