

DECLARATION FORM

COMPANY DETAILS			
Company Name: Contact Person: Contact Number: Email Address:			· ·
DECLARATION (EMF	PLOYEE)		
I affirm that all information given in this registration form is true and accurate to the best of my knowledge, and that I have not deliberately omitted any relevant fact. I understand that any false or misleading declaration shall make me liable for disqualification, or if already admitted, for expulsion from the programme without any refund of fees paid. I have understood all the Terms and Conditions as stated in the REGISTRATION FORM. I agree to comply and abide by the decision of SAAA@Singapore / SAAA Cargo Services Pte Ltd concerning this application. (Refer to the link in REGISTRATION FORM for details of the Terms and Conditions)			
Name and Signature of Applicant:			
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NRIC / FIN Number: Date:			
DECLARATION (EMF	PLOYER)		
We declare that the employee participating in the Professional Conversion Program (PCP) For Air Freight Officer and Air Freight Executive has been employed for a role relevant to supply chain and logistics operations. We further agree to release the employee for training per the training schedule and ensure that the in-company On-the-Job Training (OJT) will be conducted per standards of the framework.			
Name and Signature of	Employer:	Company Stamp:	
Designation: Date:	<u> </u>		