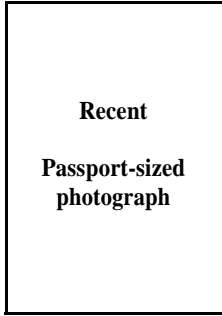


**Application for Certification Examination  
for Professional Interpreters (CEPI)**  
School of Humanities & Behavioural Sciences,  
Singapore University of Social Sciences  
463 Clementi Road, Singapore 599494  
Tel: 6248 9129 Fax: 6462 1349 [www.suss.edu.sg](http://www.suss.edu.sg)  
Email: shbs\_cepi@suss.edu.sg



**1 Personal Information**

<b>(A) FULL NAME</b>  In block letters and underline surname	Mr/Ms/Mrs/Mdm/Dr*		NRIC No / Passport No:
<b>(B) ADDRESS</b>	Residential Address		Telephone Contact Residential
	E-mail Contact		Mobile Office
<b>(C) NATIONALITY, RACE, BIRTH</b>	Date of Birth (dd/mm/yyyy)	Country of Birth	Nationality
	Age	Marital Status	Race
	Singapore Citizen / Permanent Resident / Employment Pass* (circle or delete as appropriate)		

**2 Academic and Professional Qualification**

<b>(A) Educational Qualification</b>				
From (month/year)	To (month/year)	Institution / Country	Qualification	Course of Study

<b>(B) Professional Qualification</b>			
From (month/year)	To (month/year)	Institution/ Country	Qualification

### 3 Current Employment

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_ Postal Code \_\_\_\_\_

Position held: \_\_\_\_\_

Tel No:         Ext:       Fax:

No. of years/months in this company: \_\_\_\_\_ From:   /    Full-time  Part-time

Job Function: \_\_\_\_\_ Industry: \_\_\_\_\_

### 4 Previous Employment History

In chronological order, beginning with your most recent past employment:

	Name of Company	Designation	Period (mm/yyyy)		No. of Years/Months
			From	To	
1)					
2)					
3)					
4)					

Total number of years/months of working experience: \_\_\_\_\_ years \_\_\_\_\_ months.

### 5 Translating/Interpreting Experiences

List out present/past employment involving translating/interpreting duties:

On what Basis: Full time <input type="checkbox"/> Part time <input type="checkbox"/> Casual <input type="checkbox"/> Contract <input type="checkbox"/>				
	Employer	Nature of the Work	Duration (mm/yyyy)	
			From	To
1)				
2)				
3)				
4)				

### 6 Referees

Name two referees who support your application:

1)	Name:	Contact Number:
	Designation/Organisation:	Email Contact:
2)	Name:	Contact Number:
	Designation/Organisation:	Email Contact:

## 7 Statement of Purpose

What is your purpose for enrolling in the examination? Please be concise in your statement (Use a separate sheet of paper if necessary).

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## 8 Feedback

How did you know about our Programmes?

- SUSS website                       SUSS seminars / talks                       Advertisement
- Friends / colleagues                       Direct mailer
- Others: \_\_\_\_\_

## 9 Applicant's Declaration

I certify that all information given by me in this application is true and correct.

I understand that any misrepresentation or omission is sufficient grounds for rejecting my application. I also understand that Singapore University of Social Sciences reserves the right to cancel my registration in the event of a false declaration.

I hereby agree to abide by all regulations and procedures laid down by Singapore University of Social Sciences if I am successfully registered in this Examination.

I hereby declare my consent to have my particulars made available to the examination's panel and relevant administrative staff.

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

\_\_\_\_\_  
Date

## **IMPORTANT**

**Please ensure that the following items are enclosed with your application form:**

Application fee (non-refundable) of S\$107 (inclusive 7% GST) made payable to: "Singapore University of Social Sciences"

CEPI Administration  
School of Humanities & Behavioural Sciences  
Singapore University of Social Sciences  
463 Clementi Road  
Singapore 599494

One passport-sized photograph

**Copies of the following documents:**

Certificate & Transcript(s) of all academic records (O/A Levels, Diploma, Degree) Other relevant Certificates