



**DAS Academy**  
ENABLING EXCELLENCE

**Dyslexia Association of Singapore**  
1 Jurong West Central 2, #05-01 Jurong Point  
Singapore 648886 | 6444 5700  
UEN: 202114767K | www.das.org.sg

## DAS-DAS ACADEMY SCHOLARSHIP APPLICATION

TITLE OF SPONSORED COURSE

### PART I PERSONAL PARTICULARS

Full Name (As in NRIC, underline Surname)

Postal / Home Address

Contact No.

Home :

Office :

Mobile :

E-mail Address (if any)

Nationality

Place of Birth

Singapore Permanent Resident (PR)  
Yes / No / Not applicable

### PART II EDUCATION DETAILS

(List Schools / Institutes / Polytechnics / Universities attended. Attach relevant copies of Certificates and Transcripts)

From	To	Schools / Institutes / Polytechnics / Universities attended	Qualifications Obtained

### OTHER QUALIFICATIONS RELEVANT TO THE SCHOLARSHIP YOU ARE APPLYING FOR

(Typing / Shorthand / Secretarial / Technical Certificates. Attach relevant copies of Certificates and Transcripts)

From	To	School	Qualifications Obtained



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If you are at present attending any course(s) and have yet to sit for any examination, give details of Course / Institution

Do you have any relatives or friends presently working in Dyslexia Association of Singapore? If so, please give details

Name	Appointment	Centre	Relationship

Language Proficiency (Please state languages and proficiency level – Beginner, Intermediate, Advanced)	Computer Knowledge (Please state the software packages that you are familiar with)

Memberships of Clubs or Societies	Extra-Curricular Activities / Hobbies / Sports

**PART III EMPLOYMENT HISTORY**  
(Give details of your employment history beginning with most recent employer)

**PRESENT EMPLOYMENT**

Position Held	Date of Present Employment
Name of Employer	
Address of Employer	



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**PREVIOUS APPOINTMENTS**

(Use separate sheet if necessary. Please attach copies of testimonials, if available.)

Date Join	Date Left	Position Held	Name of Employer	Reason for Leaving

**CHARACTER REFEREES** (Please note that we may contact your references to seek advice.)

Name	Occupation	Years Known	Contact Number	E-mail address



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**FULL-TIME NATIONAL SERVICE RECORDS**

(Applicable to Singapore Citizens and Singapore Permanent Residents.)

Have you been exempted from full time National Service Yes / No / Not Applicable

(If YES, please attach a copy of the Exemption Notice)

**(Please attach a copy of your certificate of Conduct / Service)**

**PART IV OTHER INFORMATION**

**LIST COUNTRIES IN WHICH YOU HAVE RESIDED DURING THE PAST FIVE YEARS**

From	To	Country and Address	Purpose

**PLEASE ANSWER THE FOLLOWING QUESTIONS.** (Please circle or **BOLD** the relevant option.)

- |   |     |    |
|---|-----|----|
| 1. Do you have a criminal record?   | Yes | No |
| 2. Have you ever been dismissed, discharged, terminated or suspended from employment?   | Yes | No |
| 3. Have you ever been or are you currently under any financial embarrassment, such as an undischarged bankrupt or a judgement debtor? | Yes | No |
| 4. Have you ever had or are you currently suffering from:   |     |    |
| (a) Physical impairment?  | Yes | No |
| (b) Disease?  | Yes | No |
| (c) Medical condition?  | Yes | No |
| (d) Mental illness?   | Yes | No |
| (e) Learning difficulty (diagnosed or otherwise)?   | Yes | No |
| 5. Have you ever had any surgical operation previously?   | Yes | No |
| 7. Have you ever submitted an application for a position in DAS before?   | Yes | No |

If the answer is **YES** for any of the questions above, please provide details in the space below.



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**How did you get to know of our vacancy?**

**First point of contact/ information:**

- DAS Website     Social Media     NCSS Careers Portal     MyCareersFuture     Others \_\_\_\_\_

**Second point of contact/ information (if any):**

- DAS Website     Social Media     NCSS Careers Portal     MyCareersFuture     Others \_\_\_\_\_

**PART V FOR ADMINISTRATIVE PURPOSES**

Please complete the following sections which are required for administrative purposes only, and not used as a selection criteria.

**PERSONAL PARTICULARS**

Date of Birth	Gender Female / Male	Recent Passport size photograph (optional)
Race	Religion	
Marital Status		

**FAMILY BACKGROUND**

Name	Occupation	Relationship	Age



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**IMPORTANT NOTE:**

False particulars or suppression of material facts will render you liable to disqualification and if appointed, to dismissal.

**Date of submission**

**Signature**

**CONFIDENTIALITY CLAUSE**

All information gathered in the course of processing your employment application will be treated with confidentiality.

The information will also be retained for future job opportunities, where suitable.  
If you do not wish for your information to be retained, please select the box below.

- I do not wish for my information to be retained in the event that my employment application is unsuccessful.