

# ENSURE SAFE CONSULTANCY PTE LTD

## REQUEST FOR REFUND

### PART 1

#### Participant Particulars

Name:	Name of Employer:
NRIC/FIN:	
Mobile no:	
Email Address:	

#### Course Information

Name of Course Registered for	:
Course Commencement date	:
Total Course fee	:
Employer subsidised	Yes/ No

Date of Request:

Reasons for Refund:

I, \_\_\_\_\_ (Name, NRIC/FIN and Signature) , have read and understood the ENSURE SAFE CONSULTANCY PTE LTD's refund policy, terms and conditions before submitting this request.

Approved by

Name/Designation

ENSURE SAFE CONSULTANCY PTE LTD

### PART 2

#### ACKNOWLEDGEMENT

I, \_\_\_\_\_ (Name, NRIC/FIN and Signature) declare that I have received \$\_\_\_\_\_ in refund paid by cheque( ) on \_\_\_\_\_. I understand that this is subject to ENSURE SAFE CONSULTANCY PTE LTD's Refund policy, terms and conditions, which i have read and under stood at the time of submitting refund request.