



Student Application Form- Local

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New Application to LSBF

Existing Student of LSBF

LSBF Student ID:

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Student Acknowledgement on Pre-Course Counselling

PART A: PROGRAMME & SCHOOL INFORMATION	√ DONE
School Information: Location, Facilities, Infrastructure, Accreditations, and Affiliations	
Course Information: Name of Award, Awarding Body, Course Structure, Intake, Duration, Modules, Outline, and Pathway	
Course Entry Requirements and Enrolment Process	
Counselling & Student Support Services	
PART B: FEES PAYABLE AND PAYMENT METHODS	√ DONE
Tuition fees, Non-tuition fees, and any other relevant fess payable to London School of Business and Finance (LSBF), Singapore	
Payment modes and Methods acceptable, instalment plans where applicable, and that all payments must be made to LSBF only	
Advisory Note and Student Contract has to be signed and dated before the payment can be made	
PART C: STUDENT CONTRACT AND FEE PROTECTION SCHEME	√ DONE
Terms & Conditions stated in the student contract have been explained and fully understood by the student.	
The Fee Protection Scheme (FPS) that LSBF has in place for students. Students enrolled into LSBF are covered under LONPAC insurance.	
FPS covers only tuition fee excluding GST. A copy of Certificate of Insurance (COI) will be sent to the students.	
PART D: MEDICAL INSURANCE DECLARATION	√ DONE
Student has been briefed on the CPE Medical Insurance requirements and it has been fully understood by student.	
Student has been briefed on the exemptions from Medical Insurance and will be required to sign the declaration.	
PART E: COMMITTEE FOR PRIVATE EDUCATION (CPE)	√ DONE
Student has been briefed about CPE. CPE is a statutory board empowered with a legislative power to regulate Private Education Sector.	
For more information, please visit the CPE website at https://www.tpgateway.gov.sg/resources/information-for-private-education-institutions-(peis)	
PART F: WITHDRAWAL / REFUND / TRANSFER POLICY AND PROCEDURE	√ DONE
LSBF Refund Policy and Procedure have been explained and fully understood by the student	
LSBF Transfer / Withdrawal Policy and Procedure have been explained and fully understood by the student	
For more detailed information on Withdrawal/ Refund/ Transfer Policy and Procedure, please visit LSBF website at: https://www.lsbf.edu.sg/students/student-services/withdrawal-transfer-refunds/	
Declaration – Student / Parent or Guardian (if student is below legal age)	Declaration – LSBF Staff
I acknowledge that I have been briefed on above during pre-course counselling, and I understand its contents and my rights.	I hereby acknowledge that I have covered the above information in my pre-course counselling to the student.
Name of student / Parent or Guardian: _____	Name: _____
Signature of student / Parent or Guardian: _____	Signature: _____
Date: _____	Date: _____

CONFIDENTIAL

PERSONAL INFORMATION (all fields **MUST** be completed in full and in **BLOCK** Letters)

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs										
Full Name as in NRIC (Please underline surname)											
Date of Birth	Day:	Month:	Year:								
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female										
Nationality		NRIC/FIN No									
Highest Qualification	<input type="checkbox"/> N level <input type="checkbox"/> O level <input type="checkbox"/> A level <input type="checkbox"/> Certificate <input type="checkbox"/> Polytechnic Diploma <input type="checkbox"/> Bachelor Degree										
	<input type="checkbox"/> Masters <input type="checkbox"/> Professional Qualification <input type="checkbox"/> Others _____										
Programme Enrolled for											
Current status in Singapore	<input type="checkbox"/> Singapore Citizen		<input type="checkbox"/> Permanent Resident (PR)		<input type="checkbox"/> S Pass						
	<input type="checkbox"/> Employment Pass (EP)		<input type="checkbox"/> Work Permit (WP)		<input type="checkbox"/> Others: _____						
Address in Singapore					Postal Code: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>						
Name of Company (Optional)											
Telephone	(Home)		(Office)		(Mobile)						
E-mail (in BLOCK Letters)											

How did you hear about LSBF in Singapore?

- Social Media Friends Internet Ads Agents Existing students Others: Please specify _____

Confidentiality Clause:

All personal data and information provided by the students to the college shall be kept strictly confidential and used solely for communicating with student. Every effort shall be made to ensure that the integrity of personal particulars and confidential information entrusted to the institute is not disclosed unless required by government authorities.

Declaration of Medical Insurance

Opt - Out

I, _____, NRIC/FIN no. _____ hereby acknowledge that I have a personal/corporate medical insurance and does not require to be covered by the medical insurance scheme provided by London School of Business & Finance and will not hold London School of Business & Finance liable for any medical bills that I may incur due to any injuries at the premise of the school or illness occurrences during the course of my studies with London School of Business & Finance. **I have been informed that I will need to produce medical insurance in the event the Council for Private Education ("CPE") requests for proof of such.**

Opt - In

I do not have any Medical Insurance coverage and wish to opt in with London School of Business & Finance
I understand that there is a fee of S\$54 payable by opting in into the medical insurance scheme provided by London School of Business & Finance.

LSBF reserves the right to vary, amend the fee scale or discontinue any or all of the discounts as it deems appropriate. We reserve the right to cancel or reschedule classes due to low enrollment. Such decisions are made three business days prior to the class begin date. If a course is rescheduled for any reason, those registered will be contacted to verify availability for the rescheduled date. If those registered are not available for the rescheduled class date, tuition fee will be refunded in full. If the class is cancelled, tuition fee will be refunded in full.

Before signing this Enrolment Form, students are reminded to ensure that they have clearly understood all the terms of their enrolment with London School of Business & Finance, in particular clauses concerning refunds, deferments, waivers, course transfers and all other polices and procedure explained during pre-course counselling and signing of student contract (if applicable). Be aware that incomplete information in the 'Application Form' will result in processing delays.

CONFIDENTIAL

Declaration by Applicant:

I hereby agree that LSBF may disclose my personal data to academic and administration staff and where necessary to external institutions or partners for administration of applications and for any purpose within the legitimate interest of LSBF relating to the administration or conduct of the programme (including processing, compilation of statistics and assessment of applications).

I hereby consent to allow LSBF and its representatives to contact me for providing marketing and promotional information relating to programmes offered by LSBF which LSBF believes may be of interest or benefit to me whether such programme and / or services exist now or are created in future via

SMS / MMS / Text

Phone call

Email

Date _____

Student's Signature _____

About Your Education Consultant	5 Strongly Agree	4 Agree	3 Neutral	2 Disagree	1 Strongly Disagree
Education Consultant explained to me of the fees payable for the course thoroughly.					
Education Consultant was knowledgeable about the course details.					
I am satisfied with the pre-course counselling given to me.					

FOR OFFICIAL USE ONLY

Admission Officer

Approved by HEAD OF DEPARTMENT

Date

Date

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