



HANDICAPS WELFARE ASSOCIATION

殘疾人士福利協會

16 Whampoa Drive Singapore 327725

APPLICATION FOR COMMITTED TO LIFE LEARNING AWARD SCHEME (CLLA)

Personal Particulars							For Official Use
Name				NRIC No			
Address:							
Contact No	(O)		(H)		(Pg)		
Membership No				Membership Status	Life/Ordinary		
Type of Disability				Technical Aid Used			
Employment Details							
Name of Company							
Date joined				Position			
*Details of Courses Taken							
1) Title of Course							V/NV Point/s
Name of School/Course Provider							
Duration of Course	From			To			
2) Title of Course							V/NV Point/s
Name of School/Course Provider							
Duration of Course	From			To			
3) Title of Course							V/NV Point/s
Name of School/Course Provider							
Duration of Course	From			To			
4) Title of Course							V/NV Point/s
Name of School/Course Provider							
Duration of Course	From			To			
Signature				Date			

* Please provide details on another sheet if more space is required