



Upgrade Membership Application

Note:

- For upgrading to professional, applicant must be a registered WSHO with the Ministry of Manpower
- Please complete the form in full and submit to SISO at the above address
- Provide front and back copies of your 1) WSHO Registration Card & 2) Certificate of Registration
- All information given will be treated as private and confidential under the Personal Data Protection Act (PDPA 2012)
- Membership duration is from 1 January to 31 December of each calendar year

PERSONAL PARTICULARS (IN BLOCK LETTERS)

Name (as shown in NRIC/PP):		Current SISO Membership No:	
Date of birth:	Phone (Home):	Phone (HP):	
Residential address (in Singapore):			
Postal Code:	Nationality:	Country of Birth:	
Sex: Male/Female	Marital Status:	Personal E-mail:	
WSHO Registration No. (if any): CIF/A28/73/		Application for the year:	

EMPLOYMENT INFORMATION

Current employer:		
Employer address:		Postal Code:
Office Phone:	Office E-mail:	Fax:
Industry: Construction / Consulting / Educational Institution / Healthcare / Hospitality / Landscaping / Logistics / Marine / Manufacturing / (please circle one) Oil & Gas / Pharmaceutical / Research Institution / Retail / Sports / Others (please specify):		
Years in Industry:		
Applicant's Job Title:		Date Joined (dd/mm/yy):
Reporting to		
Name:		Job Title:

MEMBERSHIP IN OTHER PROFESSIONAL SAFETY AND HEALTH ORGANISATIONS (IF ANY)

Name of Organisation	Year Joined	Membership Category

INTERESTS

Please select your interests

- Conferences, seminars and workshops Members networking sessions SISO merchandise
- SISO quarterly magazine (Safety Matters) Courses related to WSH
- Other courses (Please indicate: _____)

DECLARATION

I have not been incriminated for offences prejudicial or detrimental to interests or objectives of the Association and profession; and I have maintained my Continuing Professional Development (CPD) record.

I wish to upgrade my Associate membership to Professional membership of the Singapore Institution of Safety Officers. I confirm that all the information given above is true and correct.

I undertake to abide by the Constitution and Code of Ethics of the Singapore Institution of Safety Officers, as they now exist, or as may hereafter be amended, so long as I remain a member of SISO. I will accept as final and binding the decision of the Executive Committee of the Institution on all matters dealt with by them in accordance with the Constitution and the Code of Ethics. I agree to be contactable by SISO on membership matters via email, phone or fax.

Signature of Applicant

Date

FOR USE BY MEMBERSHIP SUB-COMMITTEE

Application verified and recommended for the Executive Committee's approval

Signature of Membership Sub-Committee Chairman

Date

FOR USE BY EXECUTIVE COMMITTEE

Application: **APPROVED** **REJECTED**

Joined as: **PROFESSIONAL** **ASSOCIATE**

Signature of President / Vice-President / Hon. Secretary

Date