

**REPLACEMENT OF ASSESSMENT APPLICATION FORM (D)**

*(Please read the following instructions before completing this form)*

**INSTRUCTIONS**

1. All replacement requests shall be made in writing to Singapore Institution of Safety Officers (SISO) within 14 working days before the start of a new module and full payment (without WDA grant) for the re-assessment fee.
2. Only one request of replacement of assessment is allowed per module.
3. Notification on the outcome will be out within 14 working days from the date of approval.
4. Failure to comply the new arrangement will result in "Not Yet Competent".
5. All replacement date will be arranged by SISO according to availability of trainer.
6. Please ensure that ALL parts of this forms are completed before submission and that the form is signed and dated.
7. Please ensure that your supporting documents are attached with the form.
8. Late submission and incomplete form will not be accepted nor entertained.

**SECTION A: (To be completed by candidate)**

<b>Name:</b>	
<b>Address:</b>	<b>NRIC/WP No:</b>
<b>Email:</b>	<b>Contact No:</b>
<b>Course Title (Batch):</b>	
<b>Module:</b>	<b>Assessment Date:</b>
<b>Reasons (Documentary Evidence must be attached)</b>	

I have read and I agree to the above instructions

Participants' Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**SECTION B:** (To be completed by SISO)

Replacement Processing Fee Paid: <b>YES / NO</b> Level A - S\$195.80 (with GST) Level B - S\$179.80 (with GST) Level C - S\$226.30 (with GST)  Receipt No. / Date:	Documents checked and found  <b>CORRECT / INCORRECT</b>
Received by:	Date:

**SECTION C:**

Note: participant has not met the following:

75% of course attendance

**Comments:**

Secretary of Exam Board / Exam Unit Staff:	Date:
Signature:	New Assessment Date:

**SECTION D:** (To be acknowledged by applicant)

**Acknowledgement by:**

**Signature:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**NRIC/WP Number:** \_\_\_\_\_

**Date:** \_\_\_\_\_