

Course Registration Form

Caregiving Skills / Emergency Skills

Caregiving skills: Elderly & Disability

CLASS BASED:

- CERT – 9101: Certificate in Caregiving of the Elderly & Disability (5 Modules)**
- Module 1: CERT – 9110 – AED: Accidents & Emergencies Care for the Elderly & Disability (with CPR + AED Training Program)**
 - Module 2: CERT – 9110 – PHG: Personal Hygiene & Grooming**
 - Module 3: CERT – 9110 – PUC: Pressure Ulcer Care**
 - Module 4: CERT – 9110 – TRF: Transferring, lifting & moving techniques with or without equipment**
 - Module 5: CERT – 9110 – SUP: Support Care Recipients to meet their needs & Basic Medication Management**

HOME BASED:

- HBT – 501: Home Based Caregiving Training**
- HOME – 9110 – FAED: Accidents & Emergencies Care for the Older Person & Disability (with CPR + AED)**

Preferred Training Date(s) / Schedule: **1st Choice:** Intake: _____ **2nd Choice:** Intake: _____

Caregiving skills: Infant & Early Child

- CERT – 1010: Certificate in Caregiving of Infant & Early Child**
- CERT – 1011 – AECH: Accidents & Emergencies Care for the Infant & Child**
 - CERT – 1012 – BDLP: Basic Child Psychology – Early Childhood Development**
 - CERT – 1013A – PHGF: Personal Hygiene & Grooming (Infant stage) – Selective Module**
 - CERT – 1013B – BDOD: Basic Understanding of Childhood Disorder – Selective Module**

Preferred Training Date(s) / Schedule: **1st Choice:** Intake: _____ **2nd Choice:** Intake: _____

Emergency skills: First Aid Training Program / Life Saving Support Program

- | | |
|--|--|
| Standard First Aid (SFA) <input type="checkbox"/> | Standard First Aid (SFA) & CPR + AED (SFA + AED) <input type="checkbox"/> |
| Refresher Standard First Aid (RSFA) <input type="checkbox"/> | Refresher Standard First Aid (SFA) & CPR + AED (RSFA + AED) <input type="checkbox"/> |
| First Aid for the Elderly (FAE) <input type="checkbox"/> | First Aid For the Elderly & CPR + AED (FAE + AED) <input type="checkbox"/> |
| Basic Cardiac Life Support (BCLS) <input type="checkbox"/> | Refresher / Re – Certification Basic Cardio Life Support (RBCLS) <input type="checkbox"/> |
| CPR + Automated External Defibrillation (CPR + AED) <input type="checkbox"/> | |

Preferred Training Date(s) / Schedule: **1st Choice** _____ **2nd Choice:** _____

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Trainee's Particular

Full Name of Trainee : _____
(as it appears in the NRIC / Passport)

NRIC/FIN/Passport No.: _____ Date of Birth: _____ (dd/mm/yyyy)

Nationality: _____ Country of Birth : _____ Gender : F / M

Highest Education Level Attained:

Primary / Secondary / GCE ('N' or 'O') / ITE or Certificate / GCE 'A' / Diploma / Degree or above

Mailing Address: _____ Postal Code: _____

Contact No. (Mobile): _____ Home / Office: _____

Trainee's Occupation: _____ Email: _____
(course notification will be sent via emails)

Name of Emergency Contact Person:

Contact Person : _____ Contact No. _____

How to submit this Registration Form:

- Email: training@sgcaregiver.org or Post: 20 Peck Seah Street #05 – 00 Singapore 079312

Payment:

- **Method 1:** Online / Fund Transfer (will provide **the local bank** details by requested)
- **Method 2:** By Cheque
 - Write down the Name of Course / Course Date / Name of Trainee on behind of the cheque
 - Make the cheque payable to: **Singapore Caregiver Training & Consultancy Pte. Ltd**
 - Mailing address: **Singapore Caregiving Academy**
20 Peck Seah Street #05 – 00 Singapore 079312

Declaration

Yes, I _____ (Name of Participant) hereby wish to participate in the above training and certify that the information provided is correct. I will not hold Singapore Caregiver Training & Consultancy Pte. Ltd. responsible for any mishaps occur during my participation. **I fully accept that there will be no fee refunded for cancellation made within 7 working days prior to course commencement.** Any request for replacement of trainee or postponement of course is to be made in writing to Singapore Caregiver Training & Consultancy Pte. Ltd. at least 7 working days before the course commencement.

Name of Participant : _____ Date : _____