



# NEW WEST COAST (PTE) LTD

1 Pandan Road , Singapore 609253  
Tel : (65) 6268 6307 Fax : (65) 6265 2825  
Email : nwcgroup@singnet.com.sg

**FOR ENQUIRY : Annie @ 62686307** Email: nwc.atp@nwcgroup.com.sg

A Singapore Workforce Development Agency (WDA) -ATO

For WSQ –Frame work in **Apply Workplace Safety & Health in Process**

**Plant (AWSHPP)** (Formally known as OPSOC - under MOM accreditation)

**For Whom:**

Employees/Persons from Marine, Construction and Oil/Petrochemical Industries

**Course Objective:**

At the end of course, trainees will be able to recognize the common safety and health hazards and take precaution to avoid injuries and diseases in the workplace.



**\* AWSHPP - APPLICATION FORM \***

**FREE PARKING\***  
**Venue Between City & Jurong Island**

**Promo \$90\/-**

**Course Fees:**  
**\$\$100-00** (Inclusive of GST)

**Medium of Instruction:**  
English / Mandarin

Please tick  language type

English	<input type="checkbox"/>
Mandarin	<input type="checkbox"/>
	<input type="checkbox"/>

**Course Duration and Schedules:**

0830 – 1830hrs, Every Weekdays, , Special Request for Weekend Class

Company Name : \_\_\_\_\_ Contact Person : \_\_\_\_\_

Address : \_\_\_\_\_

Email : \_\_\_\_\_ Tel : \_\_\_\_\_ Fax : \_\_\_\_\_ Mobile No.: \_\_\_\_\_

- Please complete the application form in **BLOCK LETTERS** and provide photocopies of NRICs / Work Permits / Passports together with this application.

No.	Name of applicant (as in NRIC / Passport)	Gender (M/F)	NRIC / Fin / Work permit No.	Date of Birth (DD/MM/YYYY)	Nationality	Designation	Education Level
1							
2							
3							
4							
5							
6							

**Note:** - All participants, Strictly No Bermudas and Slipper are allow to attend the class, failure in doing so mav have to ask to leave the centre and course fees will be forfeited .

**Email : nwc.atp@nwcgroup.com.sg OR Fax the Form to : 6265 2825**

Total Course Fee : \_\_\_\_\_ \$ Paid in Cash [ ] Cheque [ ] Bank/Cheque No.: \_\_\_\_\_

Preferred Course Date : \_\_\_\_\_

Application must be accompanied by full payment.  
( Cheque should be made payable to " **New West Coast (Pte) Ltd** ".)

A Call / Confirmation Letter will be sent to your office about 3 davs before the commencement date of course.

All information given by me in this form is true and correct.

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

Designation : \_\_\_\_\_

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

Co.  
Stamp

**FOR OFFICIAL USE**

Course Date : \_\_\_\_\_ Class type : \_\_\_\_\_

Received By: \_\_\_\_\_ (Name & Sign) Date : \_\_\_\_\_

Prepared By: \_\_\_\_\_ (Name & Sign) Date : \_\_\_\_\_