



**Singapore
YOUNG GLOBAL PROFESSIONALS 2011-12**

Please send your application package to:

Mail: SSA Global
428 J Street Suite 380
Sacramento, CA 95814
USA

Fax: +1 (916) 583-7595

Email: apply@ssa-us.com

(Official use only)

APPLICATION CHECKLIST

The following items must be submitted with this application form:

- Resume/CV**
- Copy of passport (personal particulars page)
- Optional but highly recommended: Attach a full-length photo in professional attire, in front of a plain background

SECTION 1 – PERSONAL INFORMATION

First Name:	Middle Name (if any):	Last Name:
Home Address:		Email:
Home Telephone:	Cellular Number:	
Date of Birth (dd/mm/yyyy)*:	Place of Birth:	
Gender*:	Race*:	Religion*:
Marital Status*:	Country of residence:	
Country Currently In:	Country of citizenship:	
1 st Emergency Contact:	Tel:	Relationship:
2 nd Emergency Contact:	Tel:	Relationship:

* Needed for Singapore Work Visa

SECTION 2 – EDUCATION

	Name	Location	Graduation Year
University			
Major			

Please list any foreign language ability and proficiency level: _____

Are you currently a student? Yes No Overall college grades (e.g. GPA): _____

SECTION 3 – INTERNSHIP QUESTIONS

A. Please share some of your goals that you hope to achieve through the internship.

B. What is the main reason you are interested in interning in Singapore?

C. What contributions, skills and qualities will you be able to bring with you to an organization?

D. Please describe one or two accomplishments that showcase your innovation, creativity and/or other talents.

E. When can you begin the internship? If unsure, please give an estimated date range.

F. Would you consider permanent employment in Singapore after participating in this program? Yes No

G. How did you hear about this program?

- H. Which industry are you interested in? (Select/highlight at least one)** Hospitality
 Business Management Logistics Tourism Culinary Retail Sales
 International Trade and Commerce Recreation
 Other: _____

SECTION 4 – HEALTH INFORMATION

1. Do you have any medical condition that we should know about?

2. Are you allergic to any medication, food, pets, smoke, or other?

3. Please list any past health issues (e.g. asthma, chicken pox, surgeries, etc.).

4. Do you have a health record of your medical history and care? (It is advisable to bring it with you to Singapore)

Height (ft/cm):	Weight (lbs/kg):
-----------------	------------------

Name of insurance carrier (if any): _____

SECTION 5 – PASSPORT AND VISA

All interns are required to have a valid passport that will not expire at least 6 months from the date of obtaining a visa that is required to work in Singapore. Students without a valid passport should apply for one as soon as possible. Applicants on the Travel & Housing Package will be provided full assistance in the employment visa application process.

SECTION 6 – SIGNATURE

I hereby declare that all particulars furnished by me along with the information above are true. I expressly authorize SSA Global, its representatives, employees and agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and education institutions and to otherwise verify the accuracy of all information I provide in this application. I understand that if any information given by me is found false and/or inaccurate after arriving in Singapore, I may be repatriated to the country of origin with all expenses borne by me.

Date: _____
 mm/dd/yyyy

Signature of Applicant: _____
 (print your name if submitting electronically)