



**Girl Guides**  
Singapore

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**APPLICATION FORM**  
*for OVERSEAS CAMP/SEMINAR/CONFERENCE*  
**(ADULT LEADERS)**

<b>EVENT</b>	
<b>DATE</b>	<i>to</i>
<b>VENUE</b>	
<b>COUNTRY</b>	

**I. PARTICULARS OF APPLICANT**

Name (as in passport)		Date of Birth <i>dd/mm/yy</i>	Place of Birth
Passport/IC No.	Expiry Date <i>dd/mm/yy</i>	Citizenship	Religion
Address  Singapore <i>(Postal Code)</i>			
Telephone (residence)	Fax No.	Handphone/pager	
Email address			

## II. GUIDING

Current Position in Guiding	Unit	District	Division
<b>Guiding Experience</b>			
Brownie	<i>from</i>	(date)	<i>to</i> (date)
Guide	<i>from</i>	(date)	<i>to</i> (date)
Young Adult	<i>from</i>	(date)	<i>to</i> (date)
Others	<i>From</i>	(date)	<i>to</i> (date)
<b>Guiding Qualifications: (e.g. Permanent Warrant, Camper's Licence, Trainers' Certificate. Please include the relevant dates)</b>			
Description	Year	Description	Year
<b>Other Qualifications: (e.g. Standard First Aid Licence, Life-Saving Certificate) Please include the relevant dates)</b>			
Description	Year	Description	Year
<b>Guide Activities organised: (please include the relevant dates)</b>			
Description	Year	Description	Year
<b>Guide Seminars/Conferences attended : (please include the relevant dates)</b>			
Description	Year	Description	Year
<b>Guide Camps under canvas: (please include the relevant dates)</b>			
Description	Year	Description	Year

### III. PERSONAL INFORMATION

Hobbies/Interests		Membership in Other Organisation	
Present Occupation		Place of Work / School	
Special Diet (if any)			
History of Health (kindly advice of any records of problems with your health)			
In case of emergency, person to contact		Relationship with applicant	
Telephone: Residence	Office	Handphone	Pager

**DATA PROTECTION**

Girl Guides Singapore (GGS) will hold and protect all your personal particulars in accordance with the terms of Personal Data Protection Act (Singapore). I agree to be contacted for training programmes/conferences and for my personal data to be transferred to trainers and conference/activity organisers for such purposes.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

In the event that the applicant is successful in this application, I shall have no objection to her participation in the above event.

\_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Signature of Employer

\_\_\_\_\_  
Date

**Remarks by : \* Division Commissioner/ International Commissioner / Chief Commissioner**

_____	_____
_____	_____
_____	_____

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\* *Delete where applicable*