



DECLARATION OF OFFENCES FOR SCC STAFF, VOLUNTEERS AND VENDORS

Part I	
Name of Programme:	
Job Designation:	<i>Refers to your role in the Organisation, e.g. Chair of Board/ Employee/ Volunteer/ Vendor/ Executive Director/Head of Agency</i>
Name (according to NRIC):	
NRIC/ID No:	
Gender:	DOB:
Nationality:	Country of Birth:

Part II	
1. Do you have any criminal record in Singapore or overseas?	<input type="radio"/> No <input type="radio"/> Yes: <i>(details)</i> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>
2. Have you ever been, or are you currently under investigation by the Police or any other law enforcement agency in Singapore or overseas?	<input type="radio"/> No <input type="radio"/> Yes: <i>(details)</i> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>
3. Have you been involved in any court proceedings within Singapore or any other court of law outside of Singapore?	<input type="radio"/> No <input type="radio"/> Yes: <i>(details)</i> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>
4. Have you had any disciplinary proceedings initiated against you by any organisation or professional bodies?	<input type="radio"/> No <input type="radio"/> Yes: <i>(details)</i> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>
5. Have you been declared financially embarrassed or a bankrupt within the last 10 years?	<input type="radio"/> No <input type="radio"/> Yes: <i>(details)</i> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>
6. Do you have any substance dependence issues (i.e. dependence on alcohol, drugs, etc., excluding prescriptions by medical professional)?	<input type="radio"/> No <input type="radio"/> Yes: <i>(details)</i> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>

Part III

1 I understand that the above information ("my Personal Information") will be provided to the Government of Singapore, as represented by the Ministry of Social and Family Development ("Government" or "MSF"), for the purpose of assessing my suitability to run, manage, provide services or volunteer for the Programme (as specified under Part I).

2 I allow the Government to collect, share and use my Personal Information for the purposes in Paragraph 1.

3 I declare that the information provided in this form is true and correct and I furnish the information knowing that I may be liable to criminal prosecution if I have stated any information which I know to be false or do not believe to be true.

Name

Signature

Date