

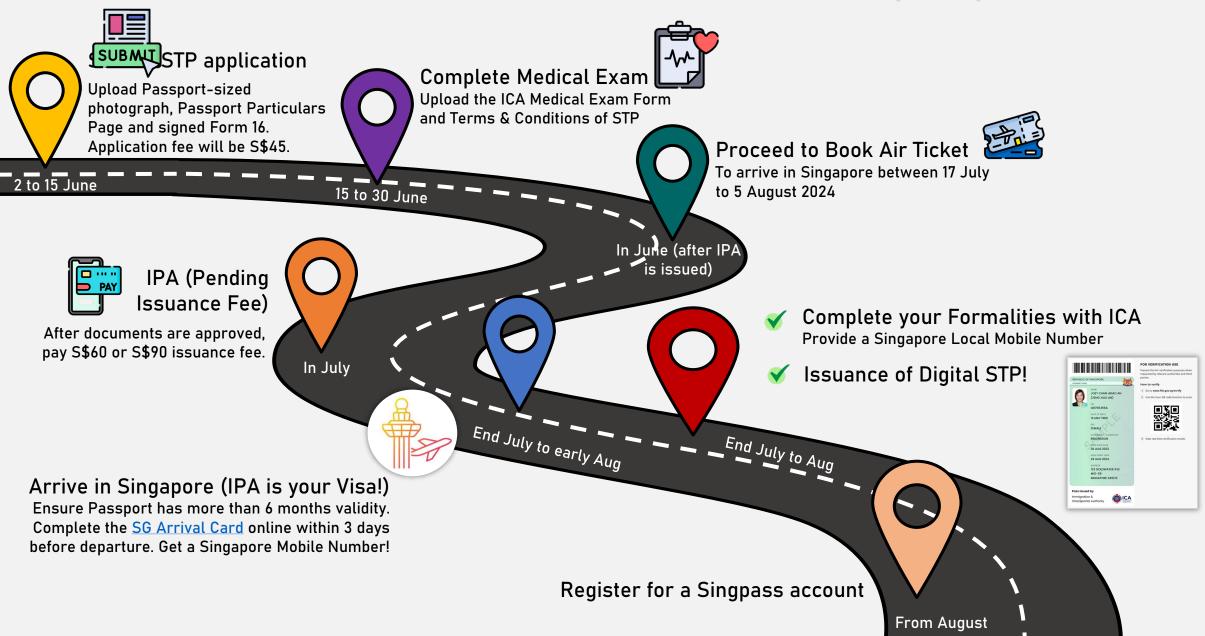
Immigration & Checkpoints Authority



APPLYING FOR A STUDENT'S PASS IN SINGAPORE

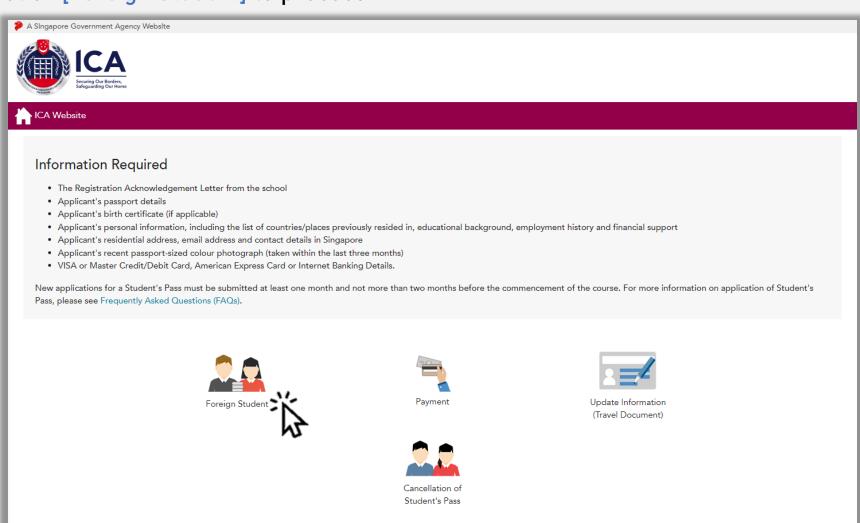
Guide prepared by NUS SCALE

JOURNEY ON BECOMING A STUDENT'S PASS (STP) HOLDER



Upon receiving your SOLAR Application Number from NUS, go to this link https://eservices.ica.gov.sg/solar/index.xhtml

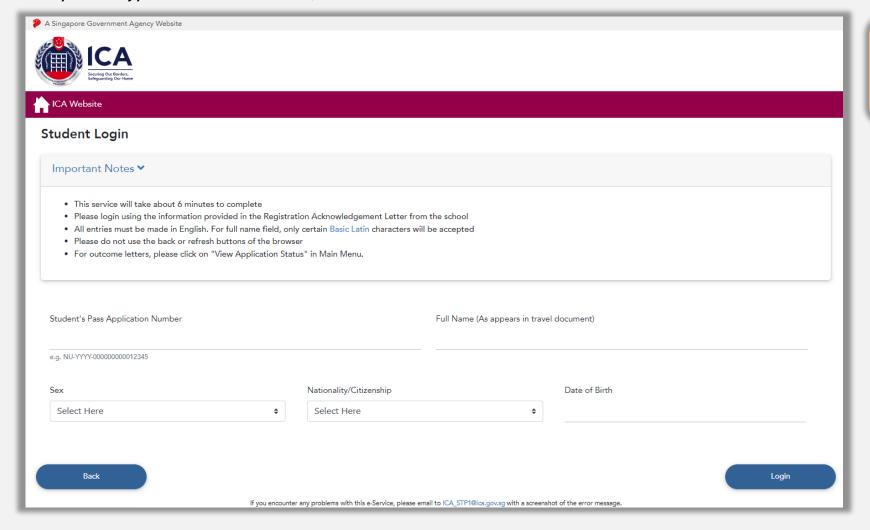
Click [Foreign Student] to proceed:



Student Login

Login with the details provided by NUS. Check your Full Name, Sex, Nationality/Citizenship and Date of Birth are correct.

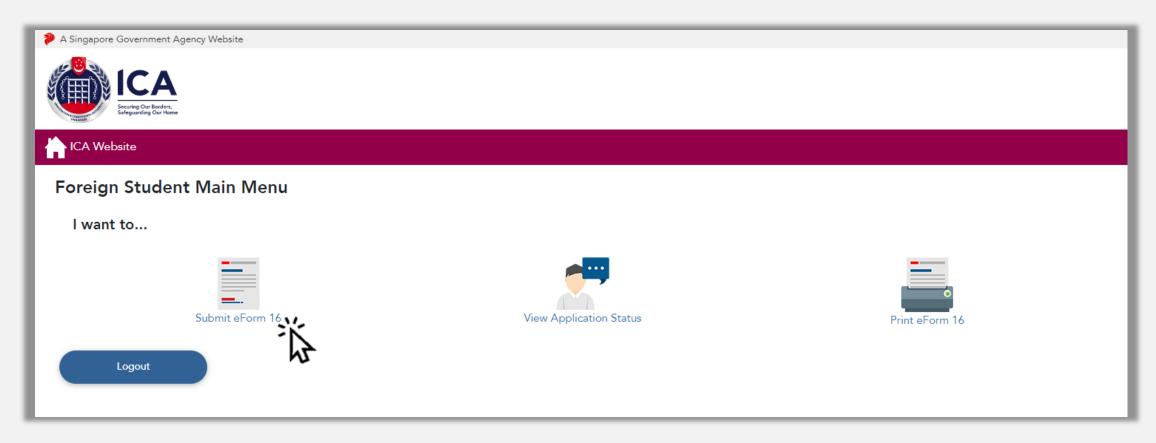
- 1. Omit Commas in your Full Name *(example: If your full name on your passport shows ANG, JINYI)*, please type ANG JINYI)
- Follow the name sequence in your passport (example: If your Surname (KUMAR) comes first before your Given Name (SANTOSH),
 please type KUMAR SANTOSH)



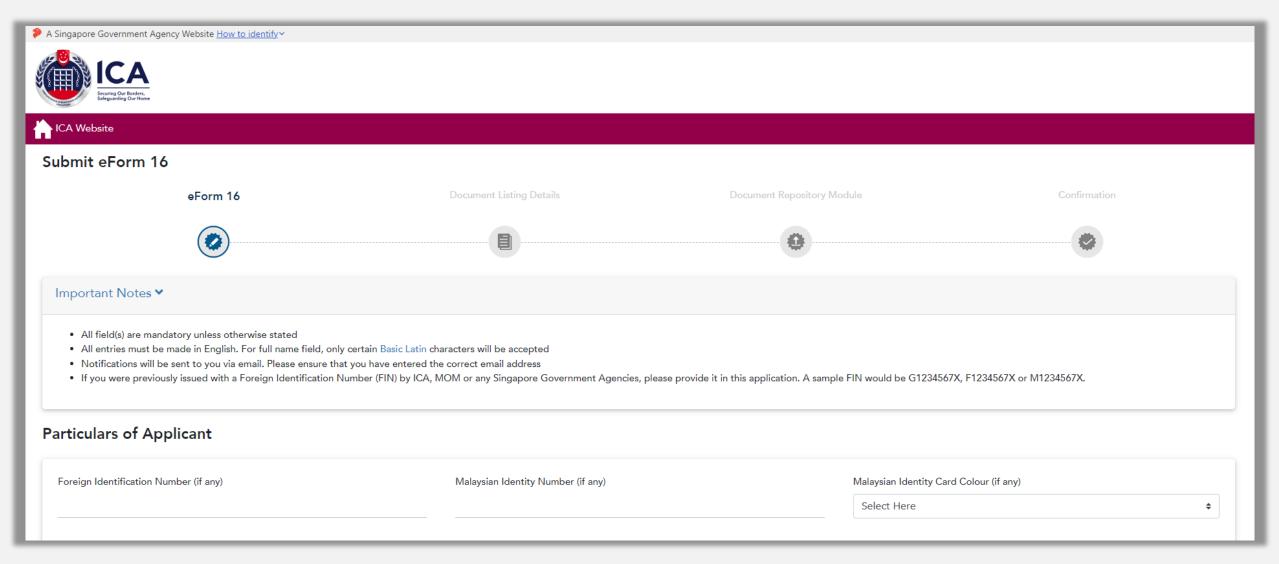
If you have difficulties logging in, please send a screenshot to scale.admissions@nus.edu.sg.

Foreign Student Main Menu

Click [Submit eForm 16] to begin your Student's Pass Application



Enter all mandatory fields under Particulars of Applicant and Travel Document Details:



Note: Please ensure that the same passport information will be used for entry to Singapore. (For dual-citizenship applicants*)

Input your Email Address – please ensure it is correct as you will receive email notification from ICA pertaining your Student's Pass application.

Input your Singapore Mobile Number if you have. Otherwise, leave it BLANK.

Contact Information **Email Address** Singapore Mobile Number (if available at time of application) From 27 Feb 2023, only Digital Student's Pass (STP) will be issued Please provide a valid email address and Singapore mobile number of the pass holder* to access the digital STP. Pass holders* may retrieve the digital STP via Singapore mobile number of the pass holder a valid Singapore mobile number of the pass holder and sin account. For non-Singpass holders, one-time-passwords will be sent via SMS to the Singapore mobile number to retrieve the digital STP once the application is approved. If the email address and Singapore mobile number provided does not belong to the pass holder*, please ensure that: (a) the pass holder* is aware that the email address and mobile number provided will be used for retrieving the digital STP if the application is approved; and (b) the owner of the email address and mobile number is aware that his or her email address and mobile number will be used for the retrieval of the digital STP. *Pass holder refers to the person who holds the STP if the application is approved.

Note: With effect from 27 February 2023, the Student's Pass will be issued digitally via FileSG and SingPass App



Ensure your COURSE is correct (Example: Master of Science (Industry 4.0) / MSc (Environmental Management))

Input your Residential Address in Singapore if you have. Otherwise, leave it BLANK.

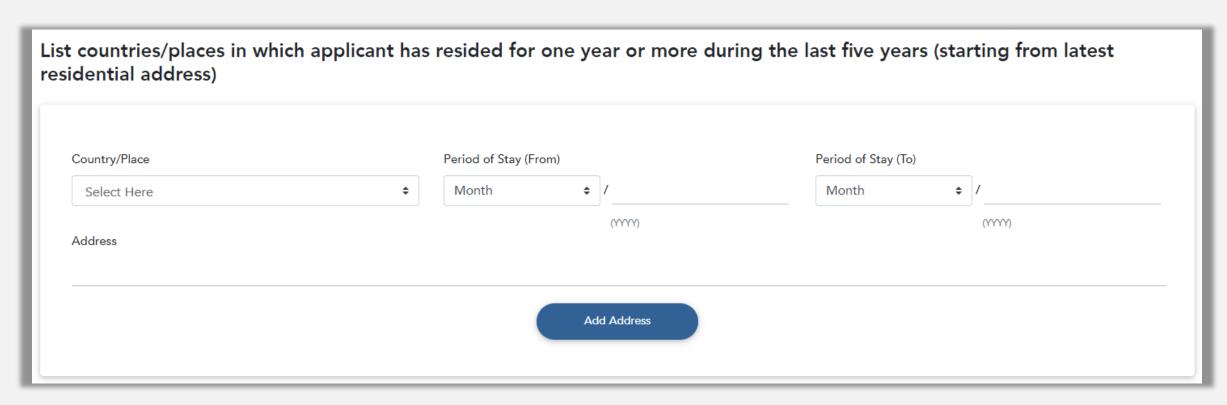
| Course Information | | |
|--------------------------------------|--------------------------------|--------------|
| Institute Applied For | Course Type | Course |
| NATIONAL UNIVERSITY OF SINGAPORE | MASTER DEGREE | |
| Period Applied From | Period Applied To | |
| 1 AUG 2023 | 31 JUL 2025 | |
| Residential Address in Singapore (if | available) Block/House Number | Floor Number |
| Unit Number | Street Name | |
| | | |

If your Father or Mother is a resident in Singapore, please enter NRIC/FIN No. and provide Singapore Mobile Number. Otherwise, select "None of the above" to proceed.

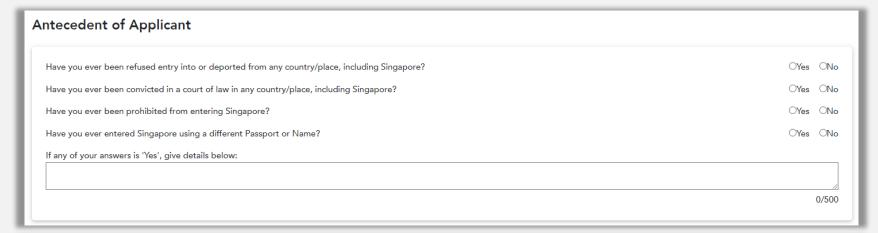
| pplicant's Father Residential Address | |
|---------------------------------------------------------------------------------------|--------------------------|
| O Singapore Citizen | Father's NRIC Number/FIN |
| O Singapore Permanent Resident | |
| Resident (Long Term Visit Pass/work pass/dependent's pass etc.) | |
| O None of the above | |
| | |
| Singapore Mobile Number | |
| pplicant's Mother Residential Address | |
| pplicant's Mother Residential Address Singapore Citizen Singapore Permanent Resident | |
| pplicant's Mother Residential Address O Singapore Citizen | |

In the last five years (example from May 2018 to May 2023), if you have stayed in a country for more than one year, please provide the information accordingly. This includes your residential address (example your home address in your home country).

Note: You need <u>not</u> declare countries you have visited for leisure purpose (e.g.: holiday) unless you have stayed there for more than one year.



Answer all questions under Antecedent of Applicant and check on checkbox to agree to the declaration.



Declaration By Applicant

I declare that all information submitted in this application is true, accurate and complete to the best of my knowledge and belief. I understand that, if I have concealed relevant information or provided false, inaccurate or misleading information, I may be prosecuted and any facilities, rights or privileges granted under this application may be withdrawn.

I undertake not to study without a Student's Pass.

I undertake not to misuse controlled drugs or to take part in any political or other activities during my stay in Singapore which would make me an undesirable or prohibited immigrant under the Immigration Act.

I undertake to comply with the provisions of the Immigration Act and any regulations made thereunder or any statutory modifications or re-enactment thereof for the time being in force in Singapore.

I undertake not to be involved in any criminal offences in Singapore.

I undertake not to indulge in any activities which are inconsistent with the purpose for which the immigration passes have been issued.

I further undertake not to be engaged in any form of employment or in any business, profession or occupation in Singapore whether paid or unpaid, without a valid work pass issued under the Employment of Foreign Manpower Act.

I am aware that overstaying or working illegally in Singapore is a serious offence and on conviction, the penalties may include mandatory imprisonment and caning.

I understand that if the Controller of Immigration is satisfied that I or any member of my family breaches this undertaking or becomes an undesirable or prohibited immigrant, he will cancel my immigration pass and the passes of the members of my family, and we may be required to leave Singapore within 24 hours of such cancellation.

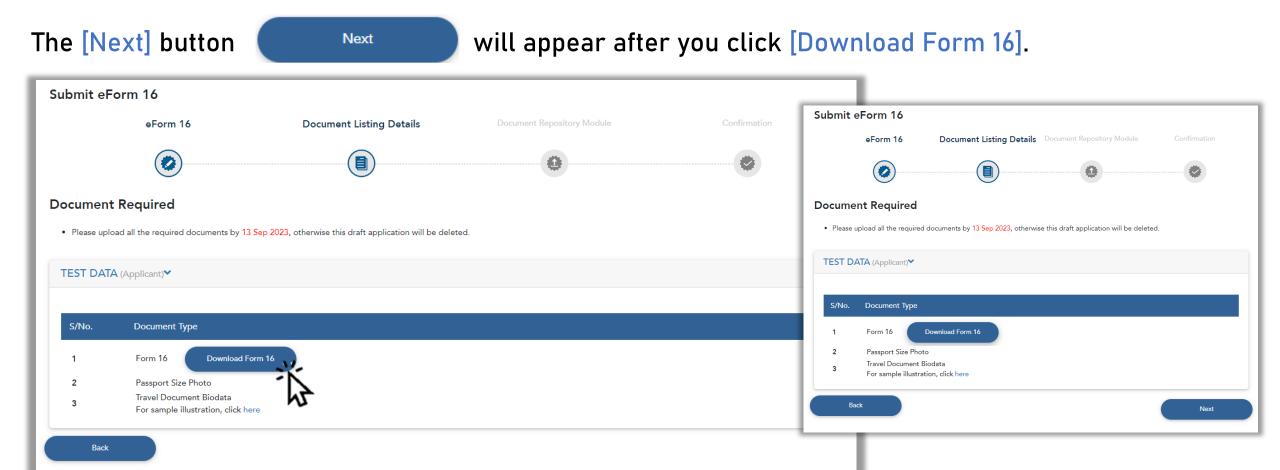
I give my consent for your department to obtain and verify information from or with any source, as you deem appropriate for the assessment of my application for immigration facilities.

☐ I have read and agreed to the declaration.

Go to Main



To ensure NO DELAY in your Student's Pass application, please upload the required documents within one week from our email.



Ensure that you write the date and sign on the form 16 before you upload it.

PART B - Declaration By Applicant

I declare that all information submitted in this application is true, accurate and complete to the best of my knowledge and belief. I understand that, if I have concealed relevant information or provided false, inaccurate or misleading information, I may be prosecuted and any facilities, rights or privileges granted under this application may be withdrawn.

I undertake not to study without a Student's Pass.

I undertake not to misuse controlled drugs or to take part in any political or other activities during my stay in Singapore which would make me an undesirable or prohibited immigrant under the Immigration Act.

I undertake to comply with the provisions of the Immigration Act and any regulations made thereunder or any statutory modification or re-enactment thereof for the time being in force in Singapore.

I undertake not to involve in any criminal offences in Singapore.

I undertake not to include in any activities which are inconsistent with the purpose for which the immigration passes have been issued.

I further undertake not to be engaged in any form of employment or in any business, profession or occupation in Singapore whether paid or unpaid, without a valid work pass issued under the Employment of Foreign Manpower Act.

I am aware that overstaying or working illegally in Singapore is a serious offence and on conviction, the penalities may include mandatory imprisonment and caning.

I understand that if the Controller of Immigration is satisfied that I or any member of my family breaches this undertaking or becomes an undesirable or prohibited immigrant, he will cancel my immigration pass and the passes of the members of my family, and we may be required to leave Singapore within 24 hours of such cancellation.

I give my consent for your department to obtain and verify information from or with any source, as you deem appropriate for the assessment of my application for immigration facilities.

| 12/05/2023 | La- |
|------------|------------------------|
| Date | Signature of Applicant |







Upload Documents

Important Notes •

These are the instructions to follow:

- · Maximum file size is 2MB per file
- · All documents are mandatory unless stated otherwise
- . In order for ICA to view your documents, please unprotect or unlock your documents before uploading
- · All documents (except photo) must be in PDF or JPG/JPEG format
- · Photo must be in JPG/JPEG format
- · Photo dimension must be 400 by 514 pixels
- · Use correct file extension (e.g. .pdf or .jpeg or .jpg) for uploaded documents

All documents have to be in English. ICA Accepts:

- Translations provided by the embassy of the document's country/place of origin
- Translations produced by a notary public in Singapore or the document's country/place of origin
- · Privately created translations attested by the embassy of the document's country/place of origin, or notarised by a notary public in Singapore or the document's country/place of origin

TEST DATA

Passport Size Photo

Please submit a passport sized colour photograph which is taken within the last three months and against a white background

*Require

Upload Document

Travel Document Biodata

Please upload your travel document biodata page

*Required

Form 16

Please upload all pages of the signed eForms.

*Required

Upload Document

Proceed

Ba

To ensure <u>NO DELAY</u> in your Student's Pass application, please upload the required documents within one week from our email.

Passport-sized Photo Guidelines:

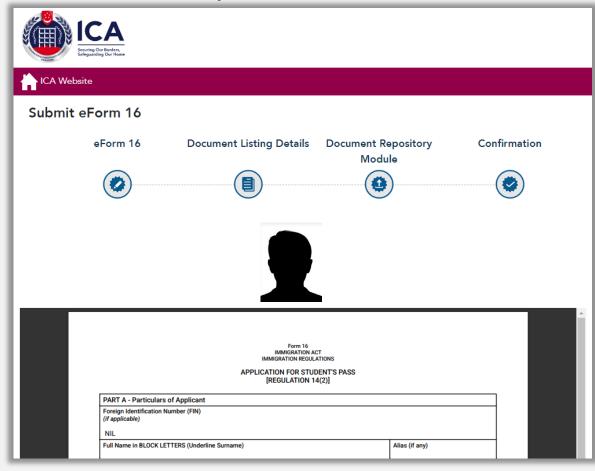
- 1. Taken within the last THREE months
- 2. Colored Photo against WHITE Background
- 3. Dimension 400 by 514 pixels
- 4. In JPG/JPEG format
- 5. File size 2MB

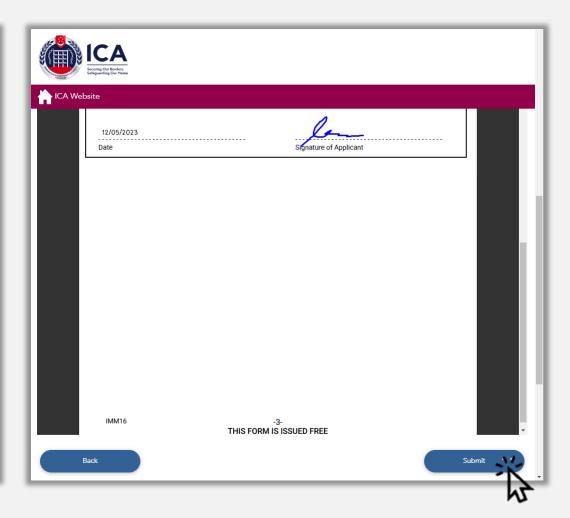
https://www.ica.gov.sg/photo-guidelines

Confirmation Page

After you have uploaded all required documents successfully, scroll through the Form 16 to ensure all details are true and correct. To amend details, click [Back]. Note: You will be required to re-upload all documents after amendments.

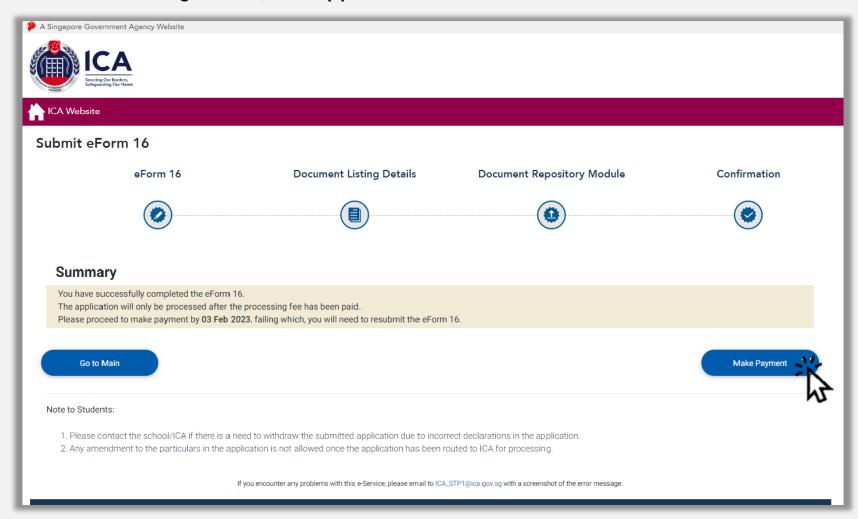
Click [Submit] to proceed.





Summary Page

Click [Make Payment] to proceed with processing fee payment within 7 days from the completion of the eForm16. Failing which, the application will be withdrawn.



Please allow at least 2 weeks for ICA processing from the point of Processing Fee Payment.



Immigration & Checkpoints Authority



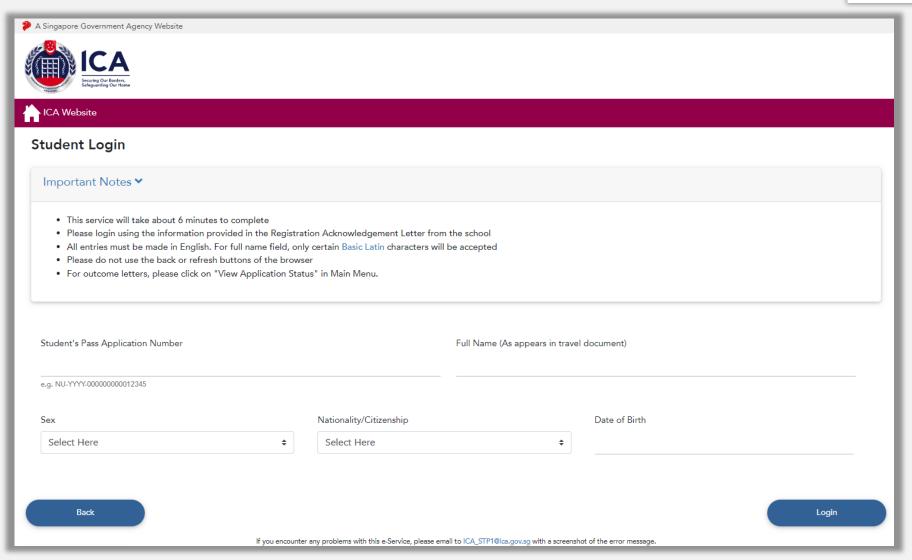
COMPLETION OF FORMALITIES FOR A STUDENT'S PASS

Guide prepared by NUS SCALE

Student Login

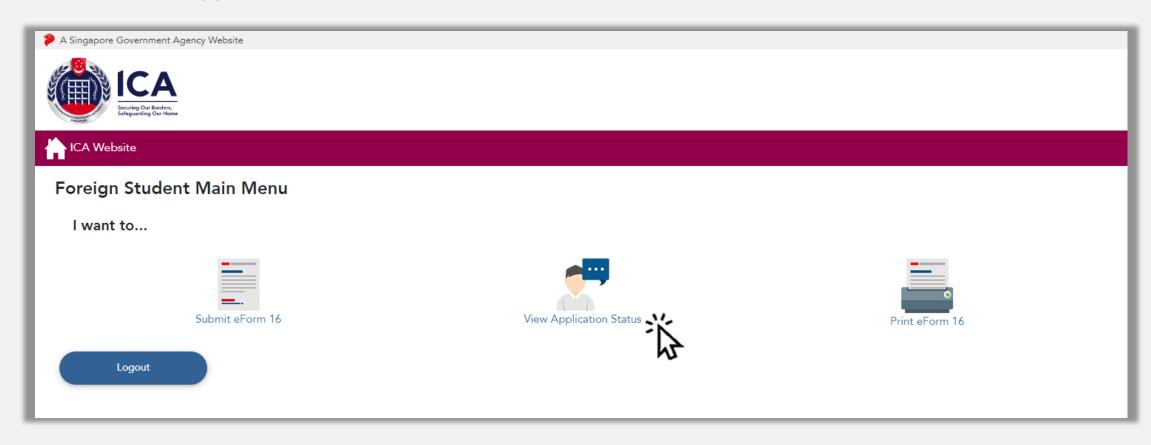


Login (https://eservices.ica.gov.sg/solar/index.xhtml) to check your application status.



Foreign Student Main Menu

Click [View Application Status]

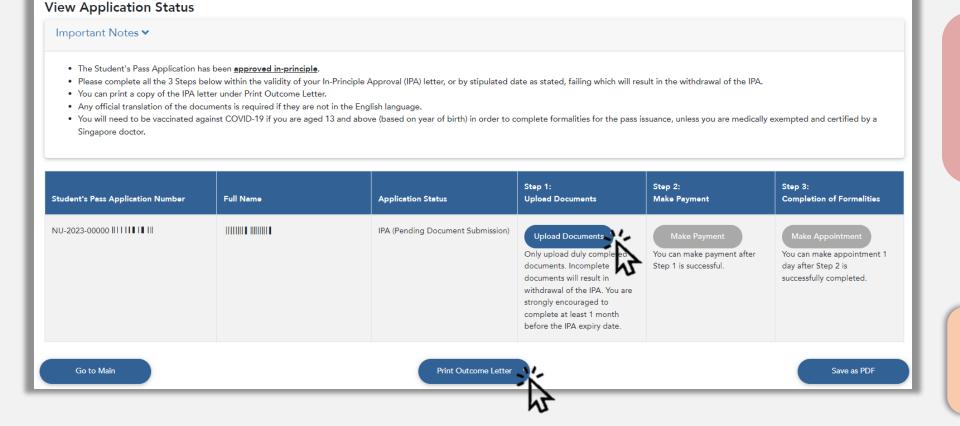


Step 1: Upload Documents

lCA Website

Click [Upload Documents] to proceed with Step 1.

Click [Print Outcome Letter] to view the In-Principle Approval (IPA) letter. Note: This letter will be withdrawn if the documents are not uploaded by the stipulated deadline.



IPA Validity 3-4 months
(from date of issuance).
Please complete the
formalities before IPA
expires!

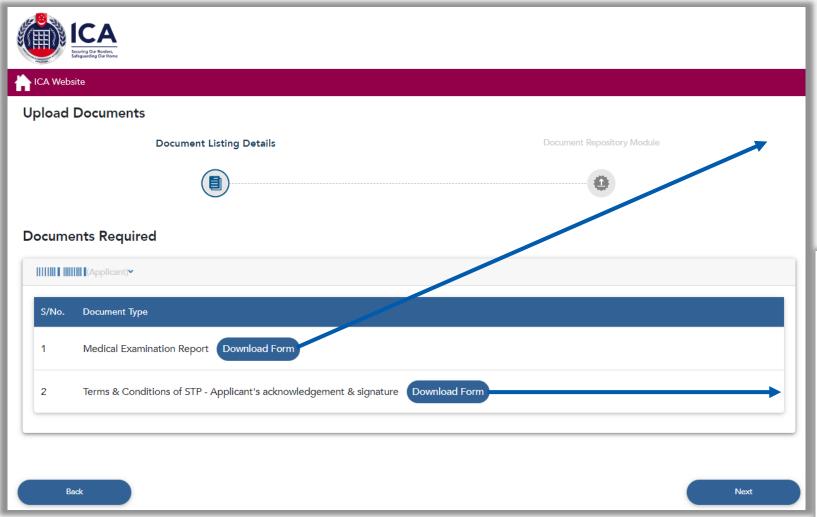
IMPORTANT

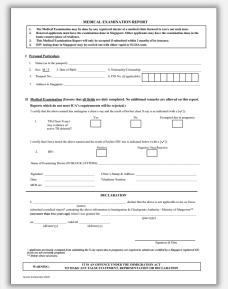
Application Status:
IPA (Pending Document
Submission)

Documents Required

Click [Download Form] to download the Medical Examination Report and Terms & Conditions of STP.

Click [Next] to upload the Forms.





| ICA Dayle to the |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Terms & Conditions of Student's Pass (STP) |
| You are required to produce your STP and your valid passport to the Immigration Officer at the Checkpoint each time you leave Singapore and return. |
| You are required to surrender any physical STP card issued to you, to the Immigration & Checkpoints Authority ("ICA"), if it is cancelled or has expired, or when a new STP is issued to you. |
| 3. Should you linted to leave Singapore and not retain on or before the early of the Pasa issued to you, you are required to submit an request let OAL or cannel this STP, before your departmen from Singapore. Those issued with a physical STP cant due as bot required to surmont it to CA before or at the time of your departure. Once the STP is cancated, at that be invalidated with immediate effect and will no longer be walld for entry into and remaining temporarily in Singapore. |
| While in Singapore, you are required to furnish the STP for inspection to an Immigration Officer or Police Officer within reasonable time when so requested. |
| 5. If the STP card is loct or stolen (applicable only if you were issued a physical STP card), you are required to make a police report immediately and regoet to ICA within 7 days to apply for a replacement, Issuance and/or replacement fees will be payable. If you recover possession of your lost STP card after reporting such loss to ICA, you are required to surrender the recovered STP card to ICA for cancellation within 7 days from the date of recovery. |
| 6. You are required to notify ICA if there is any change in your passport particulars and/or change in personal particulars (notubing name, sec or place of residence) within 14 days of the change, and seek a replacement ST with the updated particulars. For most information on reporting a change in passport or personal particulars for STP holder, please visit ICA website at MINICAL 2001-202. |
| This STP is issued to you based on the information provided vide application for which you have truthfully declared to |
| be so or for which you had consented for a proxy to submit on your behalf and are fully aware of the information so provided by your authorised proxy. You are required to notify ICA of any change in your passport particulars. |
| You shall comply with the provisions of the immigration Act and any regulations made under the Act, or any statutory modification or re-enactment in force in Singapore during your stay. |
| You shall not engage in any activities which are inconsistent with the purpose for which the STP has been issued. |
| You shall not engage in any activities during your stay in Singapore (political, or otherwise) which may make you an undesirable or prohibited immigrant under the immigration Act. |
| 11. You shall not contravene any laws which are for the timing being in force in Singapore. |

| where applicable profession, or oc | You mus cupation in | tions specified in regulations 14(1A) of the Immigration Regulations, not engage in any form of paid employment or in any business, Singapore during the validity of your Student's Pass unless you ssuad under the Employment of Foreign Manpower Act (Cap. 91A). |
|------------------------------------------------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| members breach prohibited immigr | es the Ten ant, he ma ny member | Controller of Immigration is satisfied that you or any of your family ms & Conditions mentioned above, or becomes an undesirable or or cancel the immigration passes issued to you and/or your family, of your family may be required to leave Singapore within 24 hours |
| of 7 days, your S of cancellation w Singapore unlawl | tudent's Pa ill be sent fully after the | lasses regularly. If you fail to attend classes for a continuous period ase is lable to be cancelled with effect from the 8th day. The letter to your place of residence as registered with ICA. Remaining in exceptable of your Student's Pass is an offence under Section dy our would be stable for prosecution. |
| | | tudent's Pass will be cancelled by the Controller of Immigration if to be retained as a student in your educational institution. |
| complied with. Ur reasonable cause any direction end | nder regula contraver orsed on a | n the condition that the Terms & Condition mentioned above are disch ed/2) of the immigration Regulations, any person who without ness or fails to comply with any condition imposed in respect of or ny pass or permit shall be guilty of an offence and shall be liable on edding \$1,000 or to imprisonment for a term not exceeding 6 months |
| I have read and agreed to | the Term | s & Conditions of Issue specified above. |
| Application ID | | |
| Signature | | |
| Name | | |
| Date of Birth | | |
| Nationality/Citizenship Travel Document No. | | |
| Contact Number | | |
| Residential Address | | |
| Date | | |
| | | |
| | | |
| | | |
| | | |
| | | As at 13 Sep 2023 |
| | | |

ICA Medical Examination Report - Version 6 (Dec 2023)

| I. The Medical Examination may be done by a Renewal applicants must have the examinathome country/place of residence. This Medical Examination Report will only HIV testing done in Singapore may be carri | ion done in Singapore. Other a be accepted if submitted within | pplicants may have the exa 3 months of its issuance. | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|---------------------------------------------------------|--------------------------|--|
| Personal Particulars | | | | |
| . Name (as in the passport): | | | | |
| 2. Sex: M/F 3. Date of Birth: | 4. Nationality/Citizens | ship: | | |
| 5. Passport No.: | 6. FIN No. (if applical | ble): | | |
| 7. Address in Singapore: | | | | |
| | | | | |
| Medical Examination (Ensure that all fields | | litional remarks are allo | wed on this report. | |
| Reports which do not meet ICA's requirem I certify that the above-named has undergone a che | • • | thest X-ray is as indicated (w | ith a [🗸]). | |
| | res N | | d due to pregnancy | |
| TB (Chest X-ray) Any evidence of | | | | |
| active TB detected? | | _ | _ | |
| | | | | |
| I certify that I have tested the above-named and the | Positive | Negative/ Non-Reactive | | |
| 2. HIV: | | | | |
| Name of Examining Doctor (IN BLOCK LETTER | 5)- | | | |
| Name of Examining Doctor (IN BLOCK LETTER | a) | | | |
| Signature: | Clinic's Stamp & Address: | | | |
| Date: MCR no: | Telephone Number: | | | |
| | | | | |
| | DECLARATION | | | |
| I,(name) | | that the above is not applica | | |
| submitted a medical report* containing the above ir (not more than two years ago) when I was granted | | ckpoints Authority / Ministr | y of Manpower** | |
| onvalid till | | (pass type) | | |
| | im/yy) | | | |
| | | | | |
| | | Signature & | Date | |
| Applicants previously exempted from submitting the X-ra | y report due to pregnancy are requir | ed to submit one certified by a S | Singapore registered GP, | |
| ou are not currently pregnant. Delete where necessary. | | | | |

You can complete your Medical Examination in Singapore or in your Home Country.

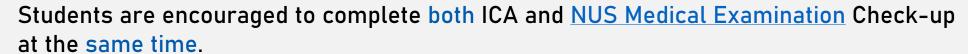
Fill in your Personal Particulars according to your Passport and indicate your Address in Singapore (if available).

This section is to be completed by your Examining Doctor.

- Examining Doctor's name and Date of medical examination
- The clinic's stamp must be endorsed on the form
- Official English translation of the medical report, if written in foreign language

Declare this section ONLY IF you are <u>not submitting any</u> <u>medical report</u> because you have done so within the last two years.

NUS Medical Examination Report





| UNIVER Admission Medical Exan | RSITY H | Repor | CENTRE (HEALTH SERVICE) t - Graduate Students (Local and International) | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| PART I (Personal Particular to be completed by Student) | | | | | |
| | A111 (1) | . r Jonar I | | | |
| Full Name:(underline Sum | ame / Famil | y Name) | Gender: Male / Fo | | |
| Course of Study: | | | Email Address: | | |
| NRIC / Passport No: | | | FIN No: | | |
| Date of Birth: | Natio | | tizenship status): | | |
| Home Address: | | , , , , | | | |
| Tel No (Handphone): | | | (Home): | | |
| | | | | | |
| In case of emergency, person to contact: _ | | | Relationship: | | |
| Person's Contact No: | | | Email Address: | | |
| 1) Are you currently under treatment or have | e been tre | ated for a | any long-term physical condition? | | |
| □ No □ Yes | | | | | |
| If "Yes", please provide details. | | | | | |
| □ No □ Yes | | • | a psychiatrist, clinical psychologist, or other mental health professional? I duration, etc – Please use a separate sheet if necessary). | | |
| □ No □ Yes | treatment, | date and | | | |
| No Yes If Yes*, please provide details (diagnosis, the state of the s | treatment, | date and | i duration, etc – Please use a separate sheet if necessary). | | |
| No Yes If Yes*, please provide details (diagnosis, t Personal Medical History: Have you suffered from or undergone any c (Please Tick [√] No or Yes. If "Yes" plea | treatment, | date and | i duration, etc – Please use a separate sheet if necessary). | | |
| □ No □ Yes If Yes*, please provide details (diagnosis, t Personal Medical History: Have you suffered from or undergone any c (Please Tick [√] No or Yes. If "Yes" plea Allergies | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide defails (diagnosis, t Personal Medical History: Have you suffered from or undergone any c (Please Tick [√] No or Yes. If "Yes" plea Allergies Acute/Chronic Respiratory Disorders | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide defails (diagnosis, t Personal Medical History: Have you suffered from or undergone any c (Please Tick [√] No or Yes. If "Yes" plea Allergies Acute/Chronic Respiratory Disorders Blood Disorders | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide details (diagnosis, t Personal Medical History: Have you suffered from or undergone any c (Please Tick [✓] No or Yes. If "Yes" plea Allergies Acute/Chronic Respiratory Disorders Blood Disorders Gastro-intestinal Disorders | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide details (diagnosis, t Personal Medical History: Have you suffered from or undergone any c (Please Tick [√] No or Yes. If "Yes" plea Allergies Acute/Chronic Respiratory Disorders Blood Disorders Gastro-intestinal Disorders Heart Disorders | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide defails (diagnosis, the second of t | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide details (diagnosis, t Personal Medical History: Have you suffered from or undergone any c (Please Tick [√] No or Yes. If "Yes" plea Allergies Acute/Chronic Respiratory Disorders Blood Disorders Gastro-intestinal Disorders Heart Disorders | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide defails (diagnosis, i Personal Medical History: Have you suffered from or undergone any of (Please Tick [V] No or Yes. If "Yes" plea Allergies Acute/Chronic Respiratory Disorders Blood Disorders Gastro-intestinal Disorders Heart Disorders Injuries or Deformities Kidney / Urinary Disorders Muscullar / Joint Disorders Muscullar / Joint Disorders (e.g. scolosis) | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide details (diagnosis, t Personal Medical History: Have you suffered from or undergone any c (Please Tick [√] No or Yes. If "Yes* plea Allergies Acute/Chronic Respiratory Disorders Blood Disorders Gastro-intestinal Disorders Heart Disorders Injuries or Deformitiles Kidney / Urinary Disorders Muscular / Joint Disorders Muscular / Joint Disorders Muscular / Joint Disorders | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide details (diagnosis, t Personal Medical History: Have you suffered from or undergone any c (Please Tick { ✓ } No or Yes. If "Yes* plea Allergies Acute/Chronic Respiratory Disorders Blood Disorders Gastro-intestinal Disorders Heart Disorders Injuries or Deformitties Kidney / Uninary Disorders Muscular / Joint Disorders Gastro-intestinal Disorders Muscular / Joint Disorders Surgical Procedures Surgical Procedures | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide defails (diagnosis, i Personal Medical History: Have you suffered from or undergone any of (Please Tick [V] No or Yes. If "Yes" plea Allergies Acute/Chronic Respiratory Disorders Blood Disorders Gastro-intestinal Disorders Heart Disorders Injuries or Deformities Kidney / Urinary Disorders Muscular / Joint Disorders Muscular / Joint Disorders Skin Disorders Surgical Procedures Any other conditions | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |
| □ No □ Yes If Yes*, please provide details (diagnosis, t Personal Medical History: Have you suffered from or undergone any c (Please Tick { ✓ } No or Yes. If "Yes* plea Allergies Acute/Chronic Respiratory Disorders Blood Disorders Gastro-intestinal Disorders Heart Disorders Injuries or Deformitties Kidney / Uninary Disorders Muscular / Joint Disorders Gastro-intestinal Disorders Muscular / Joint Disorders Surgical Procedures Surgical Procedures | of the follo | date and | if duration, etc – Please use a separate sheet if necessary). n and duration.) | | |

| Student's Full Name:(underline Sumame / Family Name) | | | | | | NRIC / Pass | sport No: | |
|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--------------------------------|-------------------------------------------------------------------------------|-----------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------|
| leight: | (unden | ne Sumame / Fan | sty Name) | Weig | ht: | ka | | |
| Blood Pressure: / mmHg Pulse Rate:per minute | | | | | | | | |
| | | | | | | _ per minute | ☐ Regula | ar 📙 Irregular |
| /isual Acuity: | Uncorrected: Righ | t 6 / Left | :6/ | | | Colour Visio | on: 🗆 Norma | Abnoma |
| | Corrected: Righ | nt: 6 / Lef | t: 6/ | | | | | |
| | | | | | | | | |
| | the following syst | | | | onse is <i>Abnormal</i> . | | | |
| Please Tick [| y j wnichever is a | Normal | | ormal | onse is Abnormai. |) | Details | |
| Eves (other) | than myopia) | Normal | Abno | ormai | | | Details | |
| Respiratory | шап туора) | | + | | | | | |
| Cardiovascu | lor | | - | | | | | |
| Gastro-Intes | | | + | | | | | |
| | | | | | | | | |
| Muscular/Sk | | | + | | | | | |
| Neurological | | | + | | | | | |
| Psychiatric | conditions, pleas | | | | | | | |
| Urinalysis | Examination (Ple | ease Tick [✓] | whichever i | value | Urine FEME (If Indicated) | Sugar RBCs | Protein /µL WBCs | pH /µL ECs |
| Urinalysis Test Date: Others (If Indicated) Radiological Please attach | Albumin: Sugar: Red Blood Cells | Negative f the Chest (fit X-ray report) | Positive Please indica | Value | Urine FEME | RBCs Casts Trichomon: Reference F | /µL WBCsCrystals as Occult Ranges: RBCs 0 | /µL ECs _Organisms It Blood 3/µL, WBCs 0 = 6/ |
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ICA Terms & Conditions of Student's Pass (STP) - as at 13 Sep 2023



Terms & Conditions of Student's Pass (STP)

- You are required to produce your STP and your valid passport to the Immigration Officer at the Checkpoint each time you leave Singapore and return.
- You are required to surrender any physical STP card issued to you, to the Immigration & Checkpoints Authority ("ICA"), if it is cancelled or has expired, or when a new STP is issued to you.
- 3. Should you intend to leave Singapore and not return on or before the expiry of the Pass issued to you, you are required to submit a request to ICA to cancel this STP, before your departure from Singapore. Those issued with a physical STP card are also required to surrender it to ICA before or at the time of your departure. Once the STP is cancelled, it shall be invalidated with immediate effect and will no longer be valid for entry into and remaining temporarily in Singapore
- While in Singapore, you are required to furnish the STP for inspection to an Immigration Officer
 or Police Officer within reasonable time when so requested.
- 5. If the STP card is lost or stolen (applicable only if you were issued a physical STP card), you are required to make a police report immediately and report to ICA within 7 days to apply for a replacement. Issuance and/or replacement fees will be payable. If you recover possession of your lost STP card after reporting such loss to ICA, you are required to surrender the recovered STP card to ICA for cancellation within 7 days from the date of recovery.
- 6. You are required to notify ICA if there is any change in your passport particulars and/or change in personal particulars (including name, sex or place of residence) within 14 days of the change, and seek a replacement STP with the updated particulars. For more information on reporting a change in passport or personal particulars for STP holder, please visit ICA website at www.ica.gov.sq
- 7. This STP is issued to you based on the information provided vide application NU-2024-0000000000xxxxx for which you have truthfully declared to be so or for which you had consented for a proxy to submit on your behalf and are fully aware of the information so provided by your authorised proxy. You are required to notify ICA of any change in your passport particulars.
- You shall comply with the provisions of the Immigration Act and any regulations made under the Act, or any statutory modification or re-enactment in force in Singapore during your stay.
- You shall not engage in any activities which are inconsistent with the purpose for which the STP has been instead.
- 10. You shall not engage in any activities during your stay in Singapore (political, or otherwise) which may make you an undesirable or prohibited immigrant under the Immigration Act.
- You shall not contravene any laws which are for the timing being in force in Singapore.

- 12. You shall not smoke, administer to yourself, consume or be in any way engaged in the trafficking of any controlled drug as defined in the Misuse of Drug Act or any written law in force relating to the control of dangerous or harmful drugs.
- 13. You shall abide by the conditions specified in regulations 14(1A) of the Immigration Regulations, where applicable. You must not engage in any form of paid employment or in any business, profession, or occupation in Singapore during the validity of your Student's Pass unless you also have a valid work pass issued under the Employment of Foreign Manpower Act (Cap. 91A).
- 14. You understand that if the Controller of Immigration is satisfied that you or any of your family members breaches the Terms & Conditions mentioned above, or becomes an undesirable or prohibited immigrant, he may cancel the immigration passes issued to you and/or your family, and you and/or any member of your family may be required to leave Singapore within 24 hours of such cancellation.
- 15. You are required to attend classes regularly. If you fail to attend classes for a continuous period of 7 days, your Student's Pass is liable to be cancelled with effect from the 8th day. The letter of cancellation will be sent to your place of residence as registered with ICA. Remaining in Singapore unlawfully after the cancellation of your Student's Pass is an offence under Section 15 of the Immigration Act and you would be liable for prosecution.
- 16. You understand that your Student's Pass will be cancelled by the Controller of Immigration if you fail to remain or cease to be retained as a student in your educational institution.
- 17. This STP is issued to you on the condition that the Terms & Conditions mentioned above are complied with. Under regulation 40(2) of the Immigration Regulations, any person who without reasonable cause contravenes or fails to comply with any condition imposed in respect of or any direction endorsed on any pass or permit shalf be guilty of an offence and shall be liable on conviction to a fine not exceeding \$1,000 of to imprisonment for a term not exceeding 6 months or to both

I have read and agreed to the Terms & Conditions of Issue specified above.

| Application ID | : | THL-2024-APP-00000xxxx |
|------------------------------------------------|---|------------------------|
| Signature | 1 | |
| Name | : | |
| Date of Birth | 1 | |
| Nationality/Citizenship Travel Document No. | : | |
| Contact Number | : | |
| Residential Address | : | |
| Date | : | |

Retrieve your Application ID from the IPA letter:

ICA
Securing Our Bondars,
Safeguarding Our Hom

ICA Building 10, Kallang Road #08-00 Singapore 208718 (Next to Lavender MRT Station) https://www.ICA.gov.sg

(Visa No.: ZZ2|||||||||

10000000

Application Summary

thool : NATIONAL UNIVERSITY OF SINGAPORE

Dear Sir/Madam,

You have been granted In-Principle Approval (IPA) for your Student's Pass (STP) application. This IPA is valid for four months from the date of approval. Your IPA will be withdrawn if the Completion of Formalities is not completed before 23/09/2023.

You must present a copy of this IPA with your valid passport for immigration clearance at the Singapore Checkpoint. Possession of a valid IPA does not guarantee your entry in Singapore. You will be granted a virit pass at the checkpoint if you are eligible to enter Singapore. The validity of this IPA does NQII constitute a valid pass to remain in Singapore. Please ensure you have a valid immigration pass to remain in Singapore at all times by seeking Visit Pass extension online (https://esservisics.govs.ge/extendingpage/extension).

Visa For Singapore

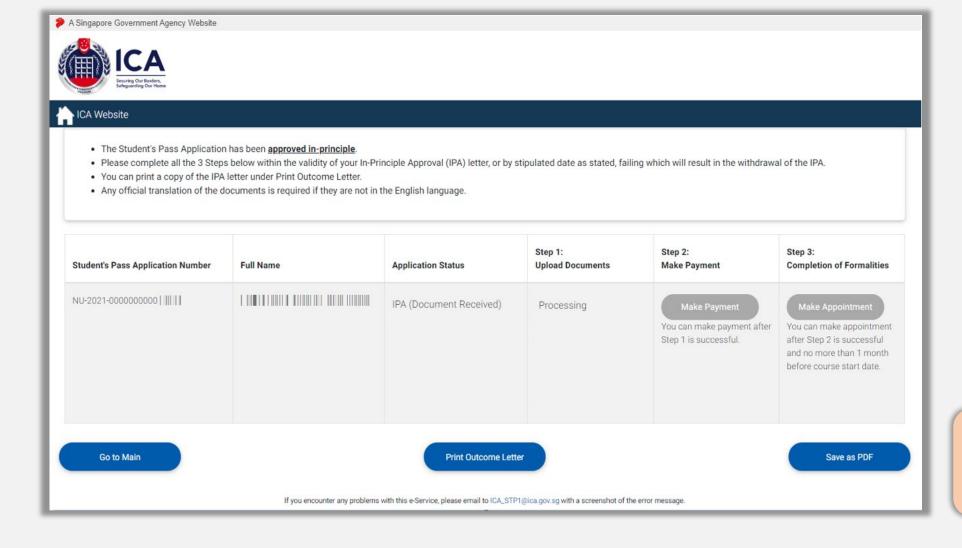
This IPA also serves as a pre-approved single journey visa should you require an entry visa. The pre-approved single-journey visa has been granted to you subject to conditions as stated under important Notes.

As at 13 Sep 2023

As at 13 Sep 2023

After Upload Documents

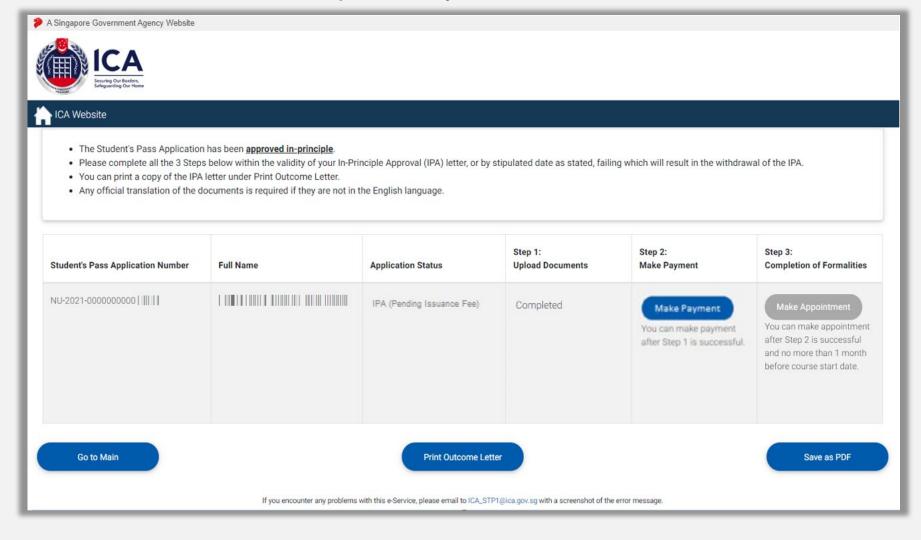
The status for Step 1 will be updated to "Processing" after you have successfully uploaded the Completion of Formalities (COF) documents.



Application Status: IPA (Document Received)

Step 2: Make Payment

After the COF documents are approved by ICA, you will be notified to make payment for the Student's Pass Issuance Fee. Click [Make Payment] to proceed.

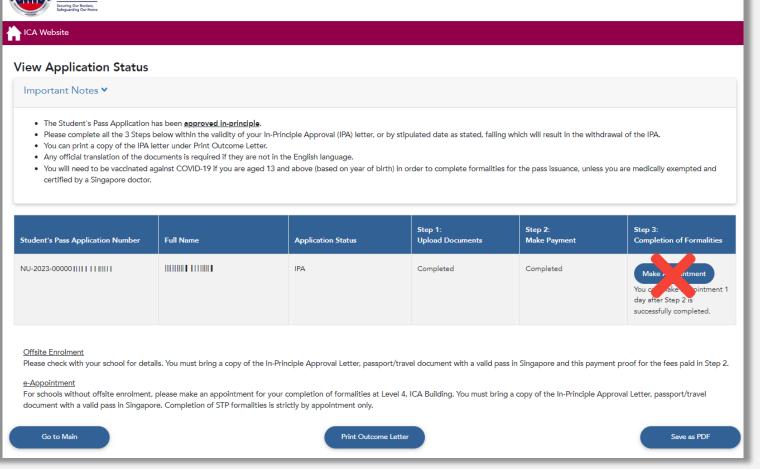


Application Status: IPA (Pending Issuance Fee)

A Singapore Government Agency Website



After making the payment, please do NOT make appointment. If you arrive early in Singapore, you may attend the ICA Offsite Enrollment (OSE) at NUS as early as 24 July 2024. Write to scale.admissions@nus.edu.sg if you wish to register for the session on 24 July 2024.



Main Sessions for ICA OSE:

To join the ICA OSE on one of the following dates, please look out for an email from NUS Office of University Registrar on the booking of slots (tentatively scheduled to be sent out in early July)

- 31 July 8 Aug
- 21 23 Aug
- Time: 1 hour slots starting at 9am, 10am, 1.30pm, 2.30pm

You need to complete Registration (Part One) to receive the booking details.

> **Application Status:** IPA

ICA OFF-SITE ENROLMENT AT NUS PREMISES

Please note the following:

- No more issuance of physical Student's Pass (STP) card
- Students need to provide a Singapore mobile number as SMS One-Time Password (OTP) will be sent out.
- Students to write their Singapore mobile number on the first page of the IPA letter. This is required for STP issuance.

Take note of the validity period of stay on your Electronic Visit Pass (ePass). Extend ePass if needed. The validity of the IPA letter does NOT constitute a valid pass to remain in Singapore. Overstaying is a punishable offence under Singapore law!

Issuance of Digital Student's Pass

Can be viewed via FileSG within the day

