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Training Centres

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Authorisation Letter

Date: _____

I, _____, (NRIC/ Identity No. _____), hereby
 (Company Authorised Personnel full name) (Format – XXXXX123A)

Authorise _____, (NRIC/ Identity No. _____),
 (Representative full name) (Format – XXXXX123A)

or * _____, to collect the below mentioned participant(s)
 (Courier Service provider)

(Card(s) / Certificate(s) / Card(s) & Certificate(s))* on our behalf.

* Please delete accordingly.

No	Name	Identity number NRIC/FIN/WP (Format – XXXXX123A)	Course Title	Course date		Receiver's signature
				From	To	

Company Authorised Personnel**Company Official Stamp**

(Name & Signature) (Mandatory)

(Mandatory)

Collection Timing:**Monday to Friday: 9:30 AM to 5:00 PM****For Official Use only:**

Verified By:

AL No: _____

(Name and Signature)

Date: _____