



PAYMENT ADVICE FORM
<University of Newcastle
/Bachelor of Environmental and Occupational Health and Safety>
Cohorts who joined in 2009 and before

Instructions:

1. Please complete this form in full and return with payment to the above address on or before **25 April 2011**.
2. All payment shall be made by cheque, NETS, Visa or Mastercard.
3. Cheques must be crossed and made payable to "PSB Academy Pte Ltd".
4. Late payment fee will be imposed at a flat fee of S\$107.00 (incl. of GST) after **25 April 2011**.
5. All fees payment are subjected to the prevailing GST rate.
6. Students who have signed the CPE Student Contract, please refer to Schedule 2.1 for the breakdown of fees.

SECTION A: STUDENT'S PARTICULARS (*Please delete accordingly)			
Name of Student (as in NRIC / Passport) *Mr / Ms / Mrs/ Mdm / Dr / Prof			App#
*NRIC / FIN (for STP students)	Student Number	Discipline BEnvOHS	Cohort / Intake
<input type="checkbox"/> Tick here if there is no change to your Postal Address and Contact Information as per last update.			
Update the following if there is any change:	Updated Postal Address		Postal Code:
	Handphone No.	Office Tel No.	Home Tel No.

SECTION B: PAYMENT DETAILS				
<input checked="" type="checkbox"/> Instalment Fee payment				
Module / Course Title and Description (Please indicate Module / Course Title, if applicable)				
[] N.A. []				
[] []				
Study Period	No. of Unit(s) enrolled		Amount per unit (before GST)	Total Amount (\$)
Trimester 2, 2011		x	\$1,400.00	=
Add 7% GST				=
Add Fee Protection Scheme &/or Medical Insurance (Inclusive of 7% GST)				\$0.00
Less Advanced Payment (if any)				()
Total Amount Payable (Inclusive of 7% GST)				
<input type="checkbox"/> Re-module course fees				
Module / Course Title and Description (Please indicate Module / Course Title, if applicable)				
[] N.A. []				
[] []				
Study Period	No. of Units Enrolled		Amount per unit (before GST)	Total Amount
Trimester 2, 2011		x	\$1,400.00	=
Add 7% GST				=
Less <Deductions>				()
Total Amount Payable				

SECTION C: DECLARATION				
<input type="checkbox"/> I understand and will comply with the terms and conditions of PSB Academy and wish to continue on the above program. I hereby enclose the payment:				
Cheque No	Bank		Amount	
NETS / Credit Card				
Amount				
_____			_____	
Signature of Student			Date	

NB: All information provided are treated with strictest confidentiality and are meant for internal use only.

PSB Academy Pte Ltd (A member of TÜV SÜD Group)
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Singapore 169567
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Co. / GST Reg. No. 200704825E

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FOR OFFICIAL USE	
Pmt Received Date : _____	Rec'd by FO : _____
Receipt No : RDC10 _____	RHN10 _____ / Student Top Up - APP. No.: _____
FPS Status: _____	
Checked by: _____	
<u>Student Services:</u>	
Courses Enrolled : _____; _____; _____; _____	
Updated by : _____	Date: _____