

1 Paya Lebar Link, Tower 1,Unit 04-01, Singapore 408533

Telephone: +65 6955 8567 Email:

pes@cisive.com

https://www.cisive.com/

## Letter of Authorization

I understand and willingly consent to the disclosure of my personal and education data to Cisive on behalf of the Ministry of Manpower Singapore insofar as the information is released solely for the purpose of evaluating my suitability for an employment pass, including to the Ministry of Manpower Singapore who may require access to my details as part of my work pass application process.

I acknowledge and agree that, where educational background verification checks may be conducted in countries where I have previously studied and/or resided, my data may be sent to, and processed in, those relevant countries in compliance to their local regulations.

I hereby voluntarily release all persons or entities requesting or supplying such information from any claims, damages or liabilities of any kind, that may arise from the use, disclosure, or release of such information.

I understand that in the event of my failure to provide Cisive with any supporting documents requested, I must inform Cisive and offer alternative solutions so that a full education verification check can be performed.

This authorization shall remain valid for 90 days from the date of signature.

I acknowledge that I have read this notice and hereby agree to the collection, use, processing and transfer of data about me in accordance with my subject rights, the Personal Data Protection (Amendment) Act 2020 (PDPA), any other applicable data privacy laws the Cisive Privacy Policy Notice and the Ministry of Manpower Singapore Privacy Notice. (The Cisive Privacy Notice can be found <a href="https://www.mom.gov.sg/privacy-statement">https://www.mom.gov.sg/privacy-statement</a>.)

1	hereby consent to the collection, use,
	processing, disclosure and/or transfer of
personal data to the bearer of this letter, Cisive Ltd, their affilia	ates, any third parties who provide services
on their behalf and to my potential/current employer, for the p	ourposes of my employment pass.

<sup>\*</sup> Kindly note that the Letter of Authorization must be signed by the applicant only.

lame (First / Middle / Last):
assport Number:
Signature:
Date:
☐ I approve that by providing my signature I have read, understood, and agree to be bound by all of the above Terms and Conditions.

Providing the electronic signatures of the Parties included in this agreement is intended to establish that the parties involved consent and agree to the use of such electronic signature with respect to this Agreement and that it is equivalent to a manual/handwritten signature.