



SINGAPORE NURSING BOARD

For Official Use	
SNB Officer:	_____
Payment mode:	*NETS / PayNow (*delete accordingly)
Receipt No.:	_____
Date:	_____

APPLICATION FOR NURSING TRANSCRIPT

Administrative Fee: S\$50.00 for each course and each additional copy of transcript cost \$5.00. Please note that each personal copy of transcript cost \$50.00. (Only ONE personal copy per course is allowed.) Only Singapore dollars are accepted.

- NOTE:
- Please submit original copy of application form.
- Nursing transcript will be sent directly to the Regulatory Authority/ University.

PART I: PARTICULARS OF APPLICANT

Full Name (As it appears on the Registration/ Enrolment/ Practising Certificate)
NRIC/ Registration/ Enrolment Number:
Residential Address:
Contact Number: Email:

*NOTE: It is necessary to provide a valid contact number and email address.

Application of transcript for:

For official use

Table with 4 columns: NAME OF COURSE, DATE OF COMMENCEMENT, DATE COMPLETED, PTS / NURSING COURSE NO.

Table with 1 column: PAYMENT

Total amount paid:

\$

PART II: DETAILS OF REGULATORY AUTHORITY/ UNIVERSITY

I hereby request my transcript to be forwarded to:

1. Name of Regulatory Authority/ University:
Address of Regulatory Authority/ University:

2. Name of Regulatory Authority/ University:
Address of Regulatory Authority/ University:

PART III: FOR PERSONAL COPY

- Personal Copy (Self-collect) Personal Copy (By Post - Please provide address below if different from above stated)

Mailing Address:

Signature of Applicant & Date

Signature & Date of Collection