

ONE@ECDA HQ ADMINISTRATOR USER AUTHORISATION FORM

Nominate the following staff as HQ Administrator(s)

I confirm that by nominating the following staff members as HQ Administrators, I have authorised them to have access to all programme and non-programme staff account information under my centres in ONE@ECDA. This nomination shall remain in force until it is revoked in writing.

S/N	Salutation	Full Name	ID Type	ID Number	Email Address	Function/s Assigned	Centres Assigned <Centre Code/ Centre Name> e.g. <ABC Centre> <PT12345>
1	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr		<input type="checkbox"/> Pink NRIC <input type="checkbox"/> Blue NRIC <input type="checkbox"/> Work Permit <input type="checkbox"/> Others			<input type="checkbox"/> (1) Employment <input type="checkbox"/> (2) Teacher Certification <input type="checkbox"/> (3) CPD Training <input type="checkbox"/> (4) All of the above	

2	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr		<input type="checkbox"/> Pink NRIC <input type="checkbox"/> Blue NRIC <input type="checkbox"/> Work Permit <input type="checkbox"/> Others			<input type="checkbox"/> (1) Employment <input type="checkbox"/> (2) Teacher Certification <input type="checkbox"/> (3) CPD Training <input type="checkbox"/> (4) All of the above	
3	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr		<input type="checkbox"/> Pink NRIC <input type="checkbox"/> Blue NRIC <input type="checkbox"/> Work Permit <input type="checkbox"/> Others			<input type="checkbox"/> (1) Employment <input type="checkbox"/> (2) Teacher Certification <input type="checkbox"/> (3) CPD Training <input type="checkbox"/> (4) All of the above	

*Delete if applicable

Revoke the following staff as HQ Administrator(s)

S/N	Salutation	Full Name	ID Type	ID Number	Email Address
1	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr		<input type="checkbox"/> Pink NRIC <input type="checkbox"/> Blue NRIC <input type="checkbox"/> Work Permit <input type="checkbox"/> Others		
2	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr		<input type="checkbox"/> Pink NRIC <input type="checkbox"/> Blue NRIC <input type="checkbox"/> Work Permit <input type="checkbox"/> Others		
3	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr		<input type="checkbox"/> Pink NRIC <input type="checkbox"/> Blue NRIC <input type="checkbox"/> Work Permit <input type="checkbox"/> Others		

¹This form is authorised by:

Name /Designation

NRIC No.

²**UEN of HQ.**

Name of HQ

Address of HQ

Company Stamp

I, declare that all the information made above are true and correct to the best of my knowledge.

Signature

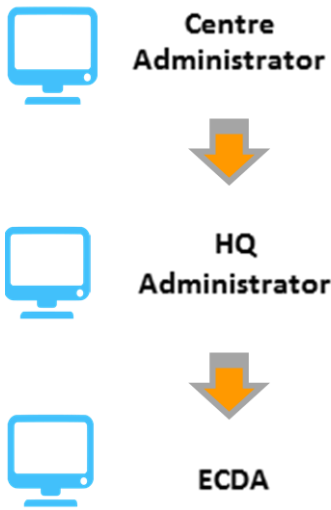
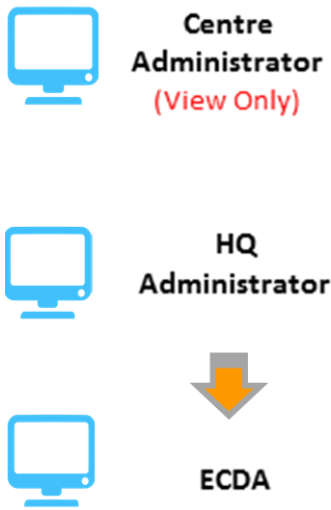
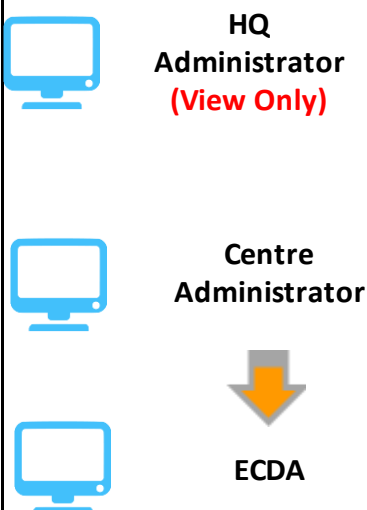
Date

¹Please note that this nomination form should be authorised by Licensee or HQ Senior Management or Director-level staff.

²Please note that this UEN No will be assign to the stated HQ for access by HQ Administrators in ONE@ECDA. If there is any change to the UEN No, please informed ECDA in writing.

Annex A (Applicable for new HQ setup)

Select the following approval structure

Tick (if applicable)	Option 1	Option 2	Option 3
Approval Structure	 <p>Centre Administrator</p> <p>HQ Administrator</p> <p>ECDA</p>	 <p>Centre Administrator (View Only)</p> <p>HQ Administrator</p> <p>ECDA</p>	 <p>HQ Administrator (View Only)</p> <p>Centre Administrator</p> <p>ECDA</p>
Summary	<ul style="list-style-type: none"> All submissions for staff particulars, teacher registration and nomination of courses will be submitted by the Centre Administrator. Role of HQ Administrator is to approve submissions by Centre, and route to ECDA for approval 	<ul style="list-style-type: none"> All submissions for staff particulars, teacher registration and nomination of courses will be submitted directly at HQ level, and routed to ECDA. Centres will not initiate submissions but will only be given access to view. This option is suitable for Anchor Operator models where teacher registration and training matters are centralised at HQ 	<ul style="list-style-type: none"> All submissions for staff particulars, teacher registration and nomination of courses will be submitted directly at Centre level, and routed to ECDA. HQ will not initiate submissions but will only be given access to view. This option is suitable for Anchor Operator models where teacher registration and training matters are decentralised.

Please indicate the ³Contact Person for all HQ Administrator(s).

Contact Name

Contact No

Email Address

³Please note that if there is any change to the Account Owner of the HQ, please inform ECDA in writing. This contact person will also receive email notifications from ECDA for HQ Administrator(s) related issues.