

Two recent photos must be submitted with this form

**SE 2**

**APPLICATION FOR MRA PASS – STABLE SUPERVISOR**

1. I, Trainer \_\_\_\_\_ will employ \_\_\_\_\_ as a Stable Supervisor and hereby apply to MRA for a pass.

The applicant is  a new stable hand

was formerly employed by Trainer \_\_\_\_\_

as a \_\_\_\_\_ MRA Pass No: \_\_\_\_\_ issued on \_\_\_\_\_

**2. PARTICULARS OF APPLICANT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

NRIC/Passport No: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Name of Kin: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Tel: \_\_\_\_\_

**3. DETAILS OF WORK PERMIT (if applicable)**

Work Permit No: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Issued by: \_\_\_\_\_ Date of Expiry: \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Trainer: \_\_\_\_\_

(I declare that all foregoing particulars are correct)

**4. DECLARATION BY EX-EMPLOYER (if applicable)**

I, Trainer \_\_\_\_\_ confirm that I was referred to in respect of this application as required under MRA Rule of Racing 37(3).

Date: \_\_\_\_\_ Signature of Ex-Trainer: \_\_\_\_\_

5. The applicant's photograph has been verified and confirmed.

Date: \_\_\_\_\_ Signature of Stipendiary Steward: \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

To Secretary, MRA

My Committee approves this application.

\_\_\_\_\_  
 Signature of Club's Secretary / Date

Pass No: \_\_\_\_\_

Valid from \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_  
 Signature of Secretary, MRA / Date

**APPLICATION FOR APPOINTMENT AS STABLE SUPERVISOR**  
(This form should be completed in **Full** and in Block Letters)

**SECTION I - PERSONAL PARTICULARS:**

Full Name : \_\_\_\_\_

Name in Chinese Character : \_\_\_\_\_  
(For Chinese Applicant)

NRIC No./Passport No. : \_\_\_\_\_

Postal Address : \_\_\_\_\_

Telephone/ Handphone : \_\_\_\_\_ Fax : \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Citizenship : \_\_\_\_\_

Marital Status : \_\_\_\_\_ Number of Children : \_\_\_\_\_

Please  
attach  
two (2)  
colour  
photos  
here

**For Office Use**

**SECTION II - EDUCATIONAL QUALIFICATIONS:**

Primary/Secondary/Tertiary Education :

Name of School	Year	Qualifications

**For Office Use**

**SECTION III - PROFESSIONAL QUALIFICATIONS**  
**(Please Specify):**

---



---



---



---



---

**SECTION IV - RACING INDUSTRY EXPERIENCE:**  
*(You must attach testimonial(s) from former employer(s) and/or licensing records from licensing authority overseas as proof of your appointment as indicated below):*

Year		Appointment Held (Please Specify)	Name of Racing Authority Issuing The Licence
From	To		

**SECTION V - SUMMARY OF DISCIPLINARY OFFENCES:**

Date	Offences/Suspensions/Disqualifications

(Please use a separate sheet if necessary)

**For Office Use**

**Have you been charged for any criminal offence and/or have pending criminal proceedings in any court of law?**

\* YES / NO

If yes, give details : \_\_\_\_\_

---

---

**SECTION VI - CURRENT FINANCIAL STANDING**

**Are you an undischarged bankrupt?**

\* YES / NO

If yes, give details : \_\_\_\_\_

---

**SECTION VII - DECLARATION:**

I declare that the information provided in this form are true and accurate.

I agree that I will be bound by, subject in all respects to, and shall comply with the Constitution, Rules of Racing, Regulations and Notices of the MRA, as may from time to time be amended and added to. I further agree to accept as final the decisions made in accordance with the Rules of Racing by the Committee of the MRA, or the Committee of any Associated or Affiliated Clubs, or their duly appointed Stewards.

I authorise investigation of all information provided by me in this form.

I accept that if any of the aforesaid declarations are found to be untrue or inaccurate, this would constitute sufficient grounds for the cancellation of my MRA Pass, and possible further disciplinary action.

---

Name of Applicant

---

Signature of Applicant

---

Date

**For Office Use**

**SECTION VIII - PARTICULARS OF EMPLOYING TRAINER:**

Name of Trainer : \_\_\_\_\_

Number of Horses Registered with MRA : \_\_\_\_\_

Names of Current Supervisors :  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name of Trainer

\_\_\_\_\_  
Signature of Trainer

\_\_\_\_\_  
Name &  
Designation

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/ Date