



AUTHORISATION FOR CHECK OFF OF UNION SUBSCRIPTIONS

The Industrial Relations Manager
Shell Eastern Petroleum Pte Ltd
9 North Buona Vista Drive
6th floor, The Metropolis Tower 1
Singapore 239920

HR Manager
Shell Chemicals Seraya Pte Ltd
61 Seraya Avenue
Singapore 627879

Through,

The General Secretary
Singapore Shell Employees' Union

I, the undersigned, hereby request and authorise you to deduct from my monthly salary and Annual Wage Supplement, as the case may be, a monthly subscription of \$9 being union dues and a deduction equivalent to one month's subscription from my Annual Wage Supplement to the National Trades Union Congress.

The amount deducted is to be sent to **SINGAPORE SHELL EMPLOYEES' UNION** of which I am a member. If I wish to stop such deduction before the end of the said period, I shall inform you in writing through my Union giving you one month's notice. The deduction should cease on the expiry of the notice period or earlier as my Union may advise you accordingly.

Name: <i>(Please write your name as in your Company Records)</i>	Signature:
NRIC No:	Date:
Personnel No:	Dept:

Witnessed by:

Name:	Date:
Signature:	Dept:

By signing this form, you agree that Singapore Shell Employees' Union may collect, use and disclose your personal data, obtained by our organisation or Shell Singapore as a result of your membership, for the following purposes in accordance with the Personal Data Protection Act 2012 and our data protection policy.

- (a) the processing of this form;
- (b) the administration of the membership with our organisation and
- (c) to conduct any Industrial Relations matters and dealings with the Shell Singapore.

Please visit our website at (www.sseu.org.sg/wps/portal/pdpa/home/pdppolicy) for further details on our data protection policy, including how you may access and correct your personal data or withdraw consent to the collection, use or disclosure of your personal data.



Personal Particulars Update Form

Full Name		
Contact No		
Address	Blk	Unit No
	Street Name	
	Building Name (if applicable)	
	Postal Code	
Email		
Emergency Contact Details		
Full Name	Relationship	Contact No