

MARITIME AND PORT AUTHORITY OF SINGAPORE

Application Form

Talent@MaritimeSingapore

Management Associates Programme

PLEASE READ ALL THESE INSTRUCTIONS BEFORE COMPLETING THE FORM

- All blank fields are to be filled in. Please indicate where information is not applicable.
- Participants and business entities must strictly adhere to the terms and conditions of the scheme
 See details at https://www.mpa.gov.sg/maritime-singapore/what-maritime-singapore-offers/developing-manpower/talent@maritimesingapore.
- Application must be submitted at least 30 days before the commencement of the programme with all the necessary supporting documents. Incomplete submission may result in a delay in the processing time.
- Please email a copy of the completed application form with relevant supporting documents to mcf@mpa.gov.sg.

ALL INFORMATION PROVIDED WILL BE HELD IN STRICT CONFIDENCE

Talent@MaritimeSingapore Applicant must complete all sections. Please attach the following supporting document:

- Associate's resume
- Associate's latest payslip (for existing employee only)

Section 1 : Information on Associate						
Name (Write in BLOCK letters)			(Date of Birth	
(As appear in NRIC / Passport and underline Surname / Family Name)			Female	☐ Male		
Race	Email Address			Contact N	No.	
Highest Educational Qualification			Name of Education Institute and Year of Graduation			
Job Title (with Sponsoring Organisation)			Date of Joining Sponsoring Organisation (dd/mm/yyyy)			
Department						
Type of NRIC		NRIC No.				
☐ Singapore Pink ☐	Singapore Blue					
Section	on 2 : Information on S	pon	soring Oı	ganisatior	1	
Name of Organisation						
Type of Enterprise: Small and	Medium-Sized (SME) / N	on-Sl	ME*			
*Please delete accordingly. SME is defined as an entity with group revenue of up to S\$100mil (as shown in the latest audited financial statements) or maximum group employment of 200 employees (as at application date). "Group" is made up of the applicant, companies owning 50% or more of the applicant and companies that applicant owns 50% or more of.						
Address						
Contact No.			Postal Code Website			
Contact No			vvebsite			
ACRA / ROS Registration No.			Nature of Business			
Contact Person & Designation	Contact No.			Email Addre	ess	

Section 3 : Information on Management Associates Programme					
Commencement Date (dd/mi	m/yyyy)		End Date (dd/mm/y	ууу)	
Which of the following areas			the Associate be invo	olved in for	the entire duration?
(Training plan to be complete	ed at Annex A	4.)			
☐ Ship Finance	Port Terminal Management, Planning & Development				
☐ Ship Broking &	Chartering	Chartering Port Economics, Marketing and Pricing			
☐ Marine Insuranc	e	☐ Marine	Engineering and Nav	al Architec	ture
☐ Maritime Law / /	Arbitration	☐ Ship/Of	fshore Structure Des	ign & Cons	truction
☐ Others (please	specify) :				
Please provide brief scope of a digitalisation / decarbonisation function or initiative which trainee will be rotated to, as part of training plan. Briefly describe how the Associate was selected for the programme.					
Section 4 : Supportable Expenses					
Basic Monthly Salary (without CPF)^ (S\$)		Estimated Increment (S\$)		Expected Increment Date^^ (dd/mm/yyyy)	
				Year 1:	
If programme includes ove	rseas stint^	^^ at countries	s listed in Annex B	Year 2 :	
Country	Estimated E Return Airfa	conomy	Estimated Start D	ate	Estimated End Date
Location of Nearest Airport to Overseas Office					
^ Funding is provided at 50% of ^ To providing information acco ^ Funding for overseas stint is *For overseas attachment to AS	ordingly if there provided at 50	are more than 2 0% / 70%* of sup	2 increments expected.	oject to a cap).

Section 5: Declaration By Sponsoring Organisation

- 1. I declare that the information provided in this application and sheets attached hereto are true to the best of my knowledge and belief and that I have not wilfully suppressed any material fact.
- 2. I give my consent for MPA to obtain and verify information from or with any source, as MPA deems appropriate for the assessment of this application.
- 3. I consent and agree that MPA may disclose information pertaining to this application to other MPA departments, other government agencies and our Board for the performance of MPA's official duties.
- 4. I also agree, if it is found that I have made a false declaration or wilfully suppressed material facts, to return the monies awarded.
- 5. I declare that the Organisation did not receive any other forms of financial assistance administered by any government bodies for this programme.
- 6. I further undertake to inform MPA immediately of any changes in the information given in this application and agree that changes made without prior agreement will render any prior approval invalid.

Authorised Signature ¹		
Name and Designation		
Contact No.	Date	

¹ Must be signed by an authorised representative of the management (other than the Associate) in the sponsoring organisation.

Annex A: Training Plan					
Training Duration ² (In months / weeks)	Name of Organisation	Name of Department	Name of City, Country	Relationship with Sponsoring Organisation	
Eg. 6 months	Eg. AAA Company	Eg. BBB Department	Eg. London, UK	(Eg. Head Office / Subsidiary / Sister Company)	

 $^{^{\}rm 2}$ Note: The minimum duration for each posting must be two weeks.

Annex B

Funding support for qualifying expenses is available for overseas stints at the following countries					
1	Argentina	10	India	19	Poland
2	Brazil	11	Indonesia	20	Saudi Arabia
3	Brunei	12	Laos	21	South Africa
4	Cambodia	13	Malaysia	22	Thailand
5	Chile	14	Mexico	23	Türkiye
6	China	15	Myanmar	24	UAE
7	Columbia	16	Namibia	25	Vietnam
8	Egypt	17	Nigeria		
9	Ethiopia	18	Philippines		