

## M P A SINGAPORE 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 <u>https://www.mpa.gov.sg/maritime-singapore/what-maritime-singapore-</u>
   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 <b>BLOCK</b> letters)	Sex		Date of Birth		
		Female	Male		
(As appear in NRIC / Passport and underline Race		Contact N			
	Email Address		Contact IV	0.	
Highest Educational Qualification		Name of Educa	tion Institute	and Vear of	
		Graduation			
Job Title (with Sponsoring Organisation	ı)	Date of Joining Sponsoring Organisation			
		(dd/mm/yyyy)			
Department					
Type of NRIC		NRIC No.			
Singapore Pink Si	ingapore Blue				
Section 2	: Information on Spor	esoring Organi	eation		
	. Information on Spor	Isoning Organia	Sation		
Name of Organisation					
Address					
		Postal Code			
Contact No		Website			
ACRA / ROS Registration No.		Nature of Business			
Contact Person & Designation	Contact No.	E	Email Addre	SS	
Section 3 : Information on Management Associates Programme					
Commencement Date (dd/mm/yyyy)	End Date (dd/mm/yyyy)				

Which of the following areas of shipping business would the Associate be involved in for the entire duration? (Training plan to be completed at <b>Annex A.</b> )						
(Training plan to be complete		<b>A.</b> )				
Ship Finance	Ship Finance		Port Terminal Mana	gement, Pl	anning & Development	
Ship Broking & Chart	ering	F	Port Economics, Ma	arketing and	d Pricing	
Marine Insurance		١	Marine Engineering and Naval Architecture			
Maritime Law / Arbitra	ation	ç	Ship / Offshore Structure Design & Construction			
Others (please speci	fy) :					
Please provide brief scope of part of training plan.	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.						
			ortable Expense			
Basic Monthly Salary (withou (S\$)	ut CPF)^	Estimated Incr	crement (S\$) Expected Increment Date^^ (dd/mm/yyyy)			
			Year 1 : Year 2 :			
If programme includes overseas stint^^^ at countries listed in Annex B						
Country	Estimated E Return Airfa		Estimated Start Date		Estimated End Date	
Location of Nearest Airport to Overseas Office						
<ul> <li>Funding is provided at 50% of supportable expenses, subject to a cap.</li> <li>To providing information accordingly if there are more than 2 increments expected.</li> <li>Funding for overseas stint is provided at 50% / 70%* of supportable expenses, subject to a cap.</li> <li>*For overseas attachment to ASEAN countries.</li> </ul>						

Section 5 : Declaration E	By Sponsoring	Organisation
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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 <sup>1</sup>					
Name and Designation	Name and Designation				
Contact No.	Date				

<sup>&</sup>lt;sup>1</sup> Must be signed by an authorised representative of the management (other than the Associate) in the sponsoring organisation.

Annex A: Trainin	g Plan			
Training Duration <sup>2</sup> (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)

 $^{2}$  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			