



MPA
SINGAPORE

MARITIME AND PORT AUTHORITY OF SINGAPORE

Application Form

Talent@MaritimeSingapore

Overseas Attachment Programme

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THE FORM

- All blank fields are to be filled in. Please indicate where information is not applicable.
- Participants and their employers must adhere to the terms and conditions of the programme, available at <https://www.mpa.gov.sg/maritime-singapore/what-maritime-singapore-offers/developing-manpower/talent@maritimesingapore>.
- A complete application comprising this application form accompanied by all necessary supporting documents must be submitted via email to mcf@mpa.gov.sg **at least 30 days prior to commencement of the programme**. Late submissions may be rejected.
- The programme may commence only after the application is approved by MPA.

INFORMATION PROVIDED WILL BE KEPT CONFIDENTIAL

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Applicant must complete all the sections. Please attach the following supporting documents:

- Participant's resume
- Copy of participant's NRIC
- Detailed attachment programme

Section 1 : Information on Participant			
Name (Write in BLOCK letters) <i>(As in NRIC/Passport and Surname/Family Name is to be underlined)</i>		Sex <input type="checkbox"/> Female <input type="checkbox"/> Male	Date of Birth
Race	NRIC No.	Email Address	Contact No.
Type of NRIC <input type="checkbox"/> Singapore Pink <input type="checkbox"/> Singapore Blue			
Section 2 : Information on Employer			
Name of Company/Organisation			
Type of Enterprise: Small and Medium-Sized (SME) / Non-SME* <i>*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.</i>			
Address			Postal Code
Contact No.		Website	
ACRA/Business Registration No.		Nature of Business	
Contact Person & Designation	Contact No.	Email Address	

Section 3 : Information on Attachment Programme*

Commencement Date (dd/mm/yyyy)

End Date (dd/mm/yyyy)

** To exclude travel dates from both the 'Commencement Date' and 'End Date'.*

Which of the following areas of shipping business would be addressed through the training?

- | | |
|--|---|
| <input type="checkbox"/> Ship Finance | <input type="checkbox"/> Port Terminal Management, Planning & Development |
| <input type="checkbox"/> Ship Broking & Chartering | <input type="checkbox"/> Port Economics, Marketing and Pricing |
| <input type="checkbox"/> Marine Insurance | <input type="checkbox"/> Marine Engineering and Naval Architecture |
| <input type="checkbox"/> Maritime Law / Arbitration | <input type="checkbox"/> Ship/Offshore Structure Design & Construction |
| <input type="checkbox"/> Others (please specify) : _____ | |

Name of Overseas Business Entity

Contact Person & Designation

Email Address

Address

Relationship of Overseas Business Entity with Employer

Targets and Goals to Achieve

Please use separate sheet if necessary.

Any Other Information

You may wish to indicate any other relevant information, which will help you in your application.

Section 4 : Supportable Expenses[^]

Economy Return Airfare

Location of Nearest Airport to Overseas Office

[^] Support granted for 50% / 70%* of supportable expenses, subject to a cap as determined by MPA.
* For overseas attachments to ASEAN countries.

Section 5a : Declarations and Undertakings By Employer and Authorised Representative

1. I, the Authorised Representative / We, the company/organisation declare that the information provided in this application form and the documents submitted herewith are true to the best of my/our knowledge and belief and that I/we have not wilfully suppressed any material fact.
2. I/We give my/our 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/We 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/We declare that the company/organisation has not applied for or received, and will not apply for any other forms of financial assistance administered by any government bodies for this programme.
5. I/We undertake to seek MPA's approval immediately in the event of any changes in the information given in this application. I/We agree that changes made without MPA's prior agreement will render any prior approval invalid.
6. I/We acknowledge that it is an offence to furnish false or misleading information to MPA. In the event that I am/we are found to have furnished any false or misleading information or submitted any false declaration or wilfully suppressed any material fact, I/we will be required to return to MPA any and all disbursed monies, failing which MPA shall have the right to take all necessary action to recover the same.

Signature of Authorised Representative¹

Name

Designation

Contact No.

Date

¹ Must be signed by an authorised representative of the management (other than the participant) in the company/organisation.

Section 5b : Declarations and Undertakings By Participant

1. **I DECLARE** that all statements made by me on this form are correct. I acknowledge that it is an offence to furnish false or misleading information to MPA. In the event that I am found to have furnished any inaccurate or false information or submitted any false declaration or willfully suppressed any material fact, I will be required to return to MPA any funding granted to me pursuant to this application, failing which MPA shall have the right to take all necessary action to recover the same.
2. **I UNDERTAKE** to serve my employer for a duration equal to the duration of the attachment upon completion of the overseas attachment programme.
3. **I UNDERTAKE** to accept and comply with MPA's Terms and Conditions for this programme should my application be approved.
4. **I DECLARE** that I have not applied for or received any other forms of financial assistance administered by any government bodies for this programme.
5. **I UNDERTAKE** to seek MPA's approval immediately in the event of any changes in the information given in this application. I agree that changes made without MPA's prior agreement will render any prior approval invalid.

Signature: _____

Date: _____