



MARITIME AND PORT AUTHORITY OF SINGAPORE

APPLICATION FOR THE OVERSEAS TRAINER ATTACHMENT PROGRAMME (OTAP)

- This form may take you 10 minutes to complete.
- You will need the estimated cost of the attachment programme to complete the form.

PLEASE READ ALL THESE INSTRUCTIONS BEFORE COMPLETING THE FORM

1. All blank fields are to be filled in. Please indicate where information is not applicable.
2. The MCF Secretariat will normally require ten working days to process applications. In more complex cases, more time would be required. Attachment training must commence only after the application is approved by MPA.
3. Please submit one copy of the completed application form with supporting documents¹ to :

**The MCF Secretariat
IMC Capability Development
Maritime & Port Authority of Singapore
460 Alexandra Road
#17-00 PSA Building
Singapore 119963**

ALL INFORMATION PROVIDED WILL BE HELD IN STRICT CONFIDENCE

Name of Sponsoring Business :

¹ The required supporting documents are trainer's curriculum vitae and detailed attachment training programme.

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APPLICATION FORM FOR THE OVERSEAS TRAINER ATTACHMENT PROGRAMME

PART 1 PERSONAL PARTICULARS OF OVERSEAS TRAINER (Please attach the CV of the trainer)

Name (Write in BLOCK letters) <i>(As appear in Passport and <u>underline</u> Surname /Family Name)</i>	Sex	Date of Birth & Age
Name & Address of Overseas Office	Tel No. : Fax No. : Email/URL :	
Nature of Business	Relationship of Overseas Office with Local Sponsoring Business	
Designation	No. of Years Working Experience	
Highest Educational and Professional Qualification		
Name and Designation of Contact Person in Overseas Office	Tel No. : Fax No. : Email :	

PART 2 DETAILS OF TRAINING

Duration of proposed training (dd/mm/yy to dd/mm/yy) : _____

No. of Weeks / Months : _____ Weeks / Months

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

- | | |
|--|---|
| <input type="checkbox"/> Ship Finance | <input type="checkbox"/> Port Economics, Marketing and Pricing |
| <input type="checkbox"/> Ship Broking & Chartering | <input type="checkbox"/> Port Terminal Management, Planning & Development |
| <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) : _____ | |

Type of Training to be conducted

- Classroom-based
 On-the-job
 Others (please specify): _____

Which aspect of the maritime business will the proposed training cover?

- Operational aspect
 Commercial aspect
 Technical aspect
 Others (please specify): _____

No. of Staff Trained/Trainees:

Percentage of trainees who are local²:

Please provide an overview of the training plan in a separate sheet. The information must include the following :

- Objective of training
- Training activities involved (on a daily or weekly basis)
- Targets/goals your business organisation wishes to achieve as a result of the training
- Other relevant information

PART 3 DETAILS OF LOCAL SPONSORING BUSINESS

Name of Local Sponsoring Business :

Nature of Business :

Email / URL :

Address of Local Sponsoring Business :

Tel No. :

Fax No. :

Name of Contact Person :

Email :

Tel No :

Fax No :

² Singaporeans and Singapore Permanent Residents

PART 4 SUMMARY OF ESTIMATED COST			
Estimated Cost of Training	Estimated Cost (S\$)		MPA Support (S\$) (For Official Use Only)
Economy Return Airfare			
Cost of Hotel Accommodation per room per night (without meals) x no. of nights	Cost per room: S\$	No. of Nights : S\$	Total Cost : S\$
OTHER RELEVANT INFORMATION			
Sponsoring business may wish to indicate any other relevant information, which will help in this application.			
PART 5 DECLARATION			
<ol style="list-style-type: none"> 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 also agree, if it is found that I have made a false declaration or wilfully suppressed material facts, to return the monies awarded. 3. I declare that we did not receive any other forms of financial assistance administered by any government bodies e.g. MAS or WDA etc for this trainer's attachment programme. 4. I further undertake to inform the Maritime and Port Authority of Singapore 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 Signature³		Business Stamp	
Name			
Designation			
Contact No.	Date		

³ Must be signed by a senior executive other than the applicant, unless he/she is the CEO or an officer holding an equivalent position in the business entity/organisation.