

WSQ FOLLOW GOOD MANUFACTURING PRACTICES

Course Date:

Course Fee (excl. GST): \$450

*SSG funding (70% of course fee): \$315

Nett Course Fee after 70% SSG Funding (incl. GST) : **\$144.45**

***Eligibility Criteria for SSG Funding:**

- ✓ Participants must be Singaporeans or Permanent Residents
- ✓ Participants who have not enjoyed course fee funding for the same course/modules before
- ✓ When the participant is company-sponsored, sponsoring companies must be registered or incorporated in Singapore and must fully sponsor the course fees

Note: Terms and Conditions for SSG Course Fee funding:

Companies and individuals who draw on the SSG course fee subsidy must meet the following ^conditions:

1. Achieve 75% attendance in all modules and whole course
2. Successfully complete and pass all required assessments by course expiry date
3. Complete the post-training surveys conducted between 3-6 months after the end of training

Singapore Polytechnic will recover the funded amount from the participants / companies if the Participant withdraws from course after acceptance of course offer / confirmation from sponsoring company or failing to meet the above ^conditions.

- This form is to be completed by company who sponsors their employee who is eligible for SSG Funding in the above course.
- This form will take about 10 minutes to complete. Information needed to fill the form: Participant's name and NRIC, Company Name and RCB number, Contact Person's names and Contact Details.

| Part A EMPLOYEE'S PARTICULARS (Please fill in <u>ALL</u> the fields) | | |
|---|---|---|
| Name as in NRIC : | NRIC No. : | Gender : <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Date of Birth (dd/mm/yyyy) : | Age (as at course start date) : | |
| Nationality : Singaporean / Singapore PR / Others If others, pls specify: _____ | Race : <input type="checkbox"/> Chinese <input type="checkbox"/> Malay <input type="checkbox"/> Indian <input type="checkbox"/> Others If others, pls specify: _____ | |
| Highest Educational Level : | Email : | |
| Home Address : | | |
| Contact Numbers : (Home) _____ (Mobile) _____ (Office) _____ | | |
| Does your employer contribute CPF for you? <input type="checkbox"/> Yes <input type="checkbox"/> No | Job Title : | |
| Industry/Sector (Please tick <u>one</u>) : <input type="checkbox"/> Childcare <input type="checkbox"/> Electronics <input type="checkbox"/> Manufacturing <input type="checkbox"/> Transport <input type="checkbox"/> Cleaning <input type="checkbox"/> Hotel/F&B/Hospitality <input type="checkbox"/> Retail <input type="checkbox"/> Other(pls state) : _____ <input type="checkbox"/> Education Services <input type="checkbox"/> Logistics/Warehousing <input type="checkbox"/> Security _____ | | Is your company a Small & Medium Enterprise, SME? (with 200 staff or below) <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Reasons for Training : <input type="checkbox"/> Relevant to current job <input type="checkbox"/> Take on additional duties in current job <input type="checkbox"/> Prepare for higher position <input type="checkbox"/> Earn higher salary <input type="checkbox"/> Prepare for future job <input type="checkbox"/> Employer's recognition <input type="checkbox"/> Other reasons (please state) : _____ | | |
| Salary Declaration : Current Monthly Gross Salary \$ _____ | | |

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| Part B | COMPANY DETAILS (Please fill in ALL the fields) |
| Registered Name Of Company : _____ Company Registration Number : _____ Company Address : _____ Postal Code : _____ Contact Person: _____ Designation : _____ Email : _____ Contact No : _____ Fax : _____ | |

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| Part C | COMPANY'S DECLARATION (Please fill in ALL the fields) |
| <p>Is the company seeking support under the SSG Funding Scheme? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Is the applicant financially sponsored for the unfunded portion in full by the company? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <hr/> <ol style="list-style-type: none"> 1. We agree to co-operate with Singapore Polytechnic in the post-course evaluation exercise required by SSG. The evaluation exercise conducted by Singapore Polytechnic includes an assessment by the direct supervisor/Reporting Officer on whether the trainee has been given a wider job scope or new responsibilities in Workplace Safety & Health related activities; and/or whether the trainees had shown an improvement and perform better in their work related to Workplace Safety & Health within 6 months of the completion of the course. 2. We agree that should the applicant(s) fail to meet the 75% attendance requirement and / or fail to sit for all required assessments and / or fail to pass all required assessments, <u>we will be liable for the total course fee without SSG Funding.</u> 3. We declare that the applicant(s) have not received course subsidy previously from SSG for this course through any other training provider. 4. We declare that all information and particulars provided in this Form are true, complete and accurate and that we have not withheld or distorted any information or particulars required under this Form. We understand that if any information or particulars provided by us is false, inaccurate, distorted or misleading in any way, Singapore Polytechnic reserves the right to withdraw the funding given to the Company. 5. We agree that the personal information we are providing in this form can be used by the Singapore Polytechnic for reports required by both SP and SSG. <p>Name of Supervisor/ Reporting/HR Officer: _____</p> <p>Designation : _____</p> <p>Signature/Date : _____ Company Stamp : _____</p> | |

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| FOR PACE ACADEMY USE | Please send Forms with crossed cheque (made payable to SINGAPORE POLYTECHNIC) to: |
| Course Fee: Option: _____ Cheque No / GIRO No: _____ Admit Term: _____ Run No. _____ Receipt No: _____ | Singapore Polytechnic Professional & Adult Continuing Education (PACE) Academy 500 Dover Road Block T1A, Level 1, Room T1A12 Singapore 139651 Tel: 67721288 Fax: 67721957 Email: pace@sp.edu.sg |