**\* Mandatory field**

**CHECK YOUR ELIGIBILITY**

**SECTION 1 OF 5 - ELIGIBILITY CHECKER**

To proceed with the application, you must have formed a CTC and developed a CTC-endorsed transformation plan and/or training plan. If your return is ‘No’, your application would not be processed. To find out how to form a CTC, please visit trainandtransform.ntuc.org.sg for more details.

**ELIGIBILITY CHECKS**

|  |  |
| --- | --- |
| Has your organisation formed a CTC? **\*** | Yes/ No |

|  |  |
| --- | --- |
| I declare that my organisation is **not** a Government Body, Statutory Board, Organ of State, wholly-owned subsidiary of Government, or NTUC-ARU department and other related organisation. **\*** | Yes/ No |

|  |  |
| --- | --- |
| Type of project funding required **\*** | Transformation with Training component (in-house training and/or external non-SSG funded courses tied to the transformation project) |

**SECTION 2 OF 5 – DECLARATION AND ACKNOWLEDGEMENT BY APPLICANT-EMPLOYER**

1. Please read through the eligibility criteria carefully and declare that you have met all the eligibility criteria of the CTC Grant.

**ELIGIBILITY CRITERIA OF APPLICANT-EMPLOYER**

1. Applicant-employer must be legally registered or incorporated in Singapore. Companies, societies, and non-profit organisations such as charities and social service agencies are eligible to apply. Government Bodies, Statutory Boards, Organs of State, wholly-owned subsidiaries of Government, and NTUC-ARU departments and other related organisations are ineligible.
2. Applicant-employer must have set up a CTC and developed a transformation plan and/or training plan that is supported by their CTC’s senior management representative and NTUC / Worker representative.
3. Applicant-employer must not be in withholding/suspension list.
4. The transformation project must achieve:
	* Enterprise transformation: Enhanced business capabilities, innovation, and/or productivity; **AND**
	* Workforce transformation: Improved employment outcomes for local workers (i.e., Singapore Citizens/ Singapore Permanent Residents) through efforts such as job redesign and commit to the following worker outcomes:
		1. Wage increment; and/or
		2. Skills Allowance (recurrent); and/or
		3. Implemented Career Development Plan (CDP) that is communicated to the staff.
5. The training component must be tied to the transformation project and achieve manpower development through training and commit to the following worker outcomes:
	1. Wage increment; and/or
	2. Skills Allowance (one-time); and/or
	3. Implemented CDP that is communicated to staff
6. Applicant-employer should not submit applications through any third party, such as external consultants, who claim to act on the organisation’s behalf
7. Please read and accept the following terms and conditions.

**ACKNOWLEDGEMENT AND CONSENT BY APPLICANT-EMPLOYER**

1. The Applicant-employer is aware of the programme requirements and deliverables for the CTC Grant.
2. The Applicant-employer understands that its Grant application may be rejected if it fails to: (a) furnish all documents required in this application; and (b) fully furnish a reply and/or additional documents as may be requested by e2i within one (1) month from each request.
3. The Applicant-employer understands that its Grant claims may be rejected if it fails to furnish all documents required for claims.
4. The Applicant-employer shall not have received funding from other Government sources for their qualifying project cost otherwise agreed by WSG in writing.
5. The Applicant-employer agrees that only applications submitted by the Applicant-employer to e2i will be considered for funding.
6. The Applicant-employer confirms that:
	1. Its directors, shareholders, office bearers, partners, employees, or any other persons related to the aforesaid persons are not given any forms of payment (including, without limitation, monies, loans, rebates, discounts, refunds, and liquidated damages, collectively, “Payments”) by consultants or vendors, the aforesaid persons or any other person related to the aforesaid persons, in connection to the programme; and
	2. There is no intention to give or receive such payments.
	3. The Applicant-employer understands that the exchange of such payments without seeking Workforce Singapore’s (WSG’s) and/or e2i’s prior written approval(s) may constitute an offence under the Penal Code (Chapter 224).
7. The Applicant-employer agrees that supportable components as stated in the LOA must be purchased within the period of funding (i.e. on or after the date of the LOA). Where there is any item purchased or committed to be purchased before the LOA start date, the entire project would be considered ineligible/void.

The Applicant-employer agrees that the training component as stated in the LOA must commence no earlier than the LOA start date and complete no later than the LOA end date. Where training is conducted before the LOA start date or after the LOA end date, the entire project would be considered ineligible/void.
For the avoidance of doubt, notwithstanding the commencement of the project, e2i shall not be obliged to disburse any funds until the Endorsement Letter has been endorsed by the CTC’s NTUC/ Worker representative, and the LOA has been accepted by the Applicant-employer, and all necessary documentation have been received by e2i and are in order.

1. The Applicant-employer confirms that worker(s) sent for training meet all the relevant eligibility criteria.
2. The Applicant-employer confirms that the training component is not funded by any other government agency and does not seek double funding for similar funding components from any other government agency.
3. The Applicant-employer confirms that the engaged Training Providers are not debarred by SkillsFuture Singapore (SSG).
4. The Applicant-employer agrees that e2i shall be entitled to share copies of the LOA and all other relevant documents and information relating to the Grant and/or Grantee with the MOM, WSG, NTUC and such other non-grant recipients. The CTC’s NTUC / Worker Rep will be required to endorse the Applicant-employer’s Transformation plan and/or Training plan, and the committed project outcomes in relation to this Grant application via the Endorsement Letter issued by e2i.
5. The Applicant-employer agrees, and procures for its employees benefitted to agree, to be profiled by the media as beneficiaries of the CTC Grant.
6. WSG and/or e2i, their/its appointed auditor and/or nominated representatives, shall at any time upon reasonable request be given full access to information (including access to premises) deemed necessary for the purposes of conducting effectiveness surveys or audits in relation to the programme.
7. WSG and/or e2i shall be entitled to recover from the Applicant-employer all grants provided or disbursed under the CTC Grant:
	1. If WSG and/or e2i determines in its sole discretion that the Applicant-employer has suppressed any material information, or provided false information, when submitting this application or the claim for the Grant;
	2. If WSG and/or e2i determines in its sole discretion that any part of the Grant was used for any purpose(s) not in accordance with the eligibility criteria, programme requirements, and deliverables as notified by WSG and/or e2i in this application and from time to time; or
	3. There are any circumstances reasonably deemed appropriate by WSG and/or e2i.
	4. For the avoidance of doubt, where WSG and/or e2i has not disbursed any part of the Grant to the applicant-employer, WSG and/or e2i is not obligated to disburse such part of the CTC Grant insofar that any event arises or has arisen under sub-clause (i) to (iii) above.
8. The Applicant-employer has not suppressed any material information or provided false information, and all information provided or to be provided shall be true, complete, and correct.
9. The Applicant-employer accepts and agrees to abide by the above terms by submitting this application. Any false information provided may constitute an offence under the Penal Code (Chapter 224).
10. WSG and/or e2i shall be entitled to approve or reject this application and/or subsequent claims for the CTC Grant at its absolute discretion, without giving any reasons whatsoever.
11. The Applicant-employer acknowledges that if they withdraw the Original Transformation Project, all Standalone Training Components related to that project will also be automatically withdrawn.
12. The Applicant-employer can only submit subsequent Standalone Training Components for an approved Transformation Project if all earlier Standalone Training Component applications tied to said transformation project have been approved.
* **By ticking, you confirm that you have read and understood the above section, declared eligibility for the CTC Grant, and accepted the terms and conditions. \***
1. Please declare the following.
* **The Applicant-employer will declare during project application if there are related-entity purchases for any of the supportable components.**
* **The Applicant-employer declares that its workers’ salaries meet prevailing PWM/ OPW requirements where applicable.**
* **The Applicant-employer declares that there is no actual, perceived, or potential conflict of interest, or any prior or existing relationship that may influence e2i’s evaluation or decision in relation to the application**.

|  |
| --- |
| **If Applicant-employer is unable to tick any of the checkboxes above, please provide the reasons. \*** |
| Type the reason here… |

**PROVIDE YOUR CONTACT DETAILS**

**Main Contact Person**

The person submitting this application is the main contact person. Notifications about the application will be sent to them. Update this as necessary whenever you resubmit the application.

**SECTION 3 OF 5: APPLICANT-EMPLOYER DETAILS**

To apply, please complete all fields unless stated otherwise.

**APPLICANT-EMPLOYER INFORMATION**

|  |  |
| --- | --- |
| Unique Entity Number (UEN) of Organisation **\*** | Type here… |
| Full Name of Organisation (as per ACRA/ROS) **\*** | Type here… |
| Registered Address (as per ACRA/ROS) **\*** | Type here… |
| Mailing address is same as the registered address? **\*** | Yes/ No |
| Mailing / Activity Address (if different from registered address in ACRA/ROS) **\*** | Type here… |
| Sector **\*** | Type here… |
| SSIC Code **\*** | Type here… |
| Total employment size excluding office bearers or other personnel listed on public records of ACRA/ROS **\*** |  |
| Type of Organisation **\***Definition of SME:1. Organisations must be registered or incorporated in Singapore; and
2. Total employment size of less than 200, based on applicant's UEN
 | Type here… |
| Name of Union(s)/Worker Rep involved **\*** | Type here… |

#### **APPLICANT-EMPLOYER'S PARTICULARS**

|  |  |
| --- | --- |
| Full Name of Contact Person (as per NRIC) **\*** | Type here… |
| Designation of Contact Person **\*** | Type here… |
| Business Contact Number of Contact Person **\*** | Type here… |
| Business Email Address of Contact Person **\*** | Type here… |
| Full Name of Alternate Contact Person (as per NRIC) | Type here… |
| Designation of Alternate Contact Person | Type here… |
| Business Contact Number of Alternate Contact Person | Type here… |
| Business Email Address of Alternate Contact Person | Type here… |

**PROPOSAL**

**SECTION 4 OF 5: PROJECT DETAILS**

The CTC Grant provides funding to support transformation and/or training that benefit Singapore Citizens/Permanent Residents (SC/SPR) employees. The successful Applicant-employer will be given a project funding period of 12 months to complete the project.

**PROJECT DETAILS**

|  |  |
| --- | --- |
| Project Title **\*** | Type your project title here… |
| A) Summary of transformation project **\*** (up to 1,000 words)* Problem statement / gaps / challenges identified
 | Type your summary of transformation project here… |
| B) How does the transformation project enhance business capabilities, improve productivity, and/or innovation? **\*** (up to 1,000 words)* Proposed solutions (e.g. equipment/training plan)
* Describe how the project enhances business capabilities / improves productivity and/or innovation
 | Type the way your project enhance business capabilities, improve productivity, and/ or innovation here… |
| C) Summary of Training Component **\*** (up to 1,000 words)Provide a summary of your training component* Background / objectives (include how the training may address skills/ capability gaps and aid in organisation’s business development)
* Overview of training plan, including training hours
* Explain how the training component is tied to the transformation project
 | Type your summary of training project here… |
| D) Calculation of Training Funding Quantum | **Please select the applicable Training Component for the Project (please select only ONE):** **\**** In-house Training
* External Training
* In-house and External Training

Note: OEM training is funded under CTC Grant for transformation projects and not funded under the training component. |

The funding rate of **in-house training** is $9 per hour per worker, and funding caps may apply. Please provide the following details below for the in-house training component.

|  |  |  |  |
| --- | --- | --- | --- |
| **SN** | **Training Module(s) \*** | **Total Number of Hours per Worker (Up to) \*** | **Number of Local Workers (SC/SPR) (Up to) \*** |
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The funding rate of **external training** is up to 70% of course fees, and funding caps may apply. Please provide the following details below for the external training component.

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| --- | --- | --- | --- | --- | --- |
| **SN** | **Name of Training Provider(s)\*** | **UEN of Training Provider(s)\*** | **Training course(s) \*** | **Course fees per pax (before GST)(S$) \*** | **Number of Local Workers (SC/SPR) (Up to) \*** |
| 1 | Type here… | Type here… | Type here… | Type here… | Type here… |
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E) Committed Worker Outcomes:

The following personnel cannot be committed to benefit under CTC Grant:

* Office bearers, or personnel listed on public records of ACRA / ROS.
* Workers on contracts of less than 1 year, freelancers, or casual workers.

**Types of Worker Outcomes**

* Wage Increment – An increase in the basic salary of an employee.
* Skills Allowance (One-Time/ Recurrent) – A monetary incentive provided to employees for acquiring or enhancing specific skills.
* Implement and communicate Career Development Plan (CDP) – A structured progression pathway in terms of job roles, skills, and wages. Candidates will undergo pre-determined training, pick-up new skillsets directly relevant to their job role, resulting in productivity for their employer, while also receiving remuneration calibrated based on their skill levels and new job role. CDP should consist of the following three key information: (i) Job role, (ii) Salary range, (iii) Skills required.

If the quantum of wage increment and skills allowance ( one-time or recurrent) or CDP job roles differs across committed workers, Applicant-employer should add more rows to reflect the different outcomes and number of workers committed under the same outcome. Workers committed in each row must be unique, i.e., same worker cannot be counted in more than one row.

**Workers outcomes for Transformation project with Training component**

(i) Workers committed for **Transformation (with or without Training)**

Specify a minimum and target number of workers involved in the Transformation project (with or without training)

who will benefit from at least one of the following worker outcomes.

|  |  |  |  |  |  |  |  |  |  |  |
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| **Groups of worker(s) with the same type of worker outcome(s)** | **Minimum number of local workers to benefit** **\*** | **Target number of local workers to benefit** **\*** | **Wage increment** **\*** | **Committed Wage Increment (%) \*** | **Recurrent Skills Allowance** **\*** | **Committed Recurrent Skills Allowance ($) \*** | **Frequency** **\*** | **Monthly Average of Skills Allowance** **\*** | **Career Development Plan(s) (CDP)** **\*** | **Committed Job Role(s) for CDP** **\*** |
| Group 1 | Type number here… | Type number here… | Yes/ No | Type number here…(Type N.A if indicated No in **Wage increment** column) | Yes/ No | Type number here…(Type N.A if indicated No in **Recurrent Skills Allowance** column) | Yearly/Half-yearly/Quarterly/Monthly(Type N.A if indicated No in **Recurrent Skills Allowance** column) | <auto-populated> | Yes/ No | Type role(s) here…(Type N.A if indicated No in **Career Development Plan(s) (CDP)** column) |
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| **Total number of unique local workers to benefit** **\*** | Type number here… | Type number here… |  |  |  |  |  |  |  |  |

(ii) Workers committed for **Training ONLY**

Specify the number of workers committed for training (in-house or external) who will benefit from at least one of the following worker outcomes.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Groups of worker(s) with the same type of worker outcome(s)** | **Target number of local workers to benefit** **\*** | **Wage increment** **\*** | **Absolute Amount ($) or Percentage (%) \*** | **Committed Wage Increment ($ / %) \*** | **One-time Skills Allowance \*** | **Committed Skills Allowance Amount ($) \*** | **Career Development Plan(s) (CDP)** **\*** | **Committed Job Role(s) for CDP** **\*** |
| Group 1 | Type number here… | Yes/ No | Type number here… | Type number here…(Type N.A if indicated No in **Wage increment** column) | Yes/ No | Type number here…(Type N.A if indicated No in **Recurrent Skills Allowance** column) | Yes/ No | Type role(s) here…(Type N.A if indicated No in **Career Development Plan(s) (CDP)** column) |
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| **Total number of unique local workers to benefit** **\*** | Type number here… |  |  |  |  |  |  |  |

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| Of the Target number of local workers to benefit under table “(i) Workers committed for Transformation (with or without Training)”, how many are committed for training? **\*** |
| Type here… |

|  |
| --- |
| Number of unique local workers to benefit under table “(ii) Workers committed for Training ONLY”**\*** |
| Type here… |

|  |
| --- |
| Total number of unique local workers committed for training (up to) **\*** |
| Type here… |

**To be eligible for CTC Grant claims disbursement, the Applicant-employer must fulfil the following outcomes within the project funding period as stated in the Letter of Award (LOA) issued upon application approval:**

* **Achieve the committed worker outcomes and minimum number of local workers (SC/SPR) for the transformation project.**
* **Achieve the committed worker outcomes for the workers sent for training, capped at the target number of workers committed.**
* **For job role(s) under PWM/OPW requirements, workers will receive the committed wage increment (calculated based on the before and after comparison of workers’ basic salary) above the current wage. The adjusted wage must be above the prevailing PWM/OPW rates.**

Notes:

* For Skills Allowance (recurrent) outcome, while the frequency can be yearly / half-yearly / quarterly / monthly (subject to CTC’s endorsement), committed workers must receive the first instance of the allowance during the project funding period to be eligible for funding.
* CDP can only be committed once per unique worker. Subsequent projects that wish to impact the same worker(s) who had benefitted from a CDP must be committed for other types of worker outcomes.
* CDP can only be committed once per job role.

|  |
| --- |
| F) How does the project achieve the committed worker outcomes? |
| Type the way your project achieve the committed worker outcomes here… |

Provide a summary:

* How will the project impact and benefit the workers through initiatives such as job redesign and local talent development initiatives?
* For CDP, please provide details such as the job role(s) committed for CDP.

If the worker outcome committed is CDP, please read the declarations below carefully and confirm your understanding of the requirements by ticking the boxes.

* **By ticking, the Applicant-Employer declares that they fully understand the comprehensive requirements of the CDP during the claim stage:**
	1. **The CDP should minimally consist of the following three key information: (i) Job role, (ii) Salary range, and (iii) Skills required.**
	2. **The Applicant-Employer needs to seek the CTC’s endorsement for the CDP.**
	3. **The CTC-endorsed CDP must be implemented with proof and date of communication to all staff to be submitted as documentary evidence at the point of claim.**
	4. **The CDP can only be committed once per (i) job role, and (ii) unique worker. Subsequent projects that wish to impact the same worker(s) who had benefitted from a CDP must be committed for other types of worker outcomes.**
* **The Applicant-Employer does not have an existing CDP that is communicated to all staff (note: CDP should comprise information on the job role and its salary ranges and/or skills required).**

## **PROVIDE DETAILS OF COSTS**

**G) Funding components**

Provide details for each item/equipment/solution seeking funding under this project. Please exclude GST from the cost as GST is not supported under the CTC Grant.

Notes:

1. Attach at least 2 quotations for each item/equipment/solution as supporting documents.
2. If the respective component is from a sole provider, the Applicant-employer to tick the checkbox, provide justification below for why the component must be purchased from the vendor and that it is cost reasonable.
3. Maintenance / subscription components stated in bundled quotations or as standalone quotations must not be more than 12 months in duration.
4. If Applicant-employer changes vendor for maintenance / subscription components at time of claims, invoices must state the duration of support.
5. If the respective component contains **Tablet(s), Notebook(s), iPad(s) and/or Smart Phone(s)**, the Applicant-employer to tick the checkbox and explain below how such items contribute significantly to the transformation project.

**All cost components are to exclude GST.**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **S/N** | **Component** | **Qty.** | **Total est. cost (S$)[[1]](#footnote-1)4** | **Cost of quotation 1 (S$)** | **Cost of quotation 2 (S$)** | **Cost of quotation 3 (S$)** | **Attachment for quotation 1** | **Attachment for quotation 2** | **Attachment for quotation 3** | **Component is only available from a sole provider** | **Reason for selecting the quotation** | **Component contains Tablet(s), Notebook(s),iPad(s) and/or Smart Phone(s)** | **How the Tablet(s), Notebook(s), iPad(s), and/or Smart Phone(s) will significantly contribute to the transformation project** |
| 1 | Type here… | Type here… | Type here… | Type here… | Type here… | Type here… | For attachment file… | For attachment file… | For attachment file… | Yes/ No |  | Yes/ No | Type here… |
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| --- |
| Grant total estimated cost requested (S$): |
| Type here… |

* **By ticking, it is confirmed that all components above are not from entities related to the Applicant-employer.**

If any of your component is from a related entity, please:

1. indicate which component and provide justification for why the component must be purchased from the vendor and that it is cost reasonable. (up to 1,000 words)
2. provide ACRA of the Applicant-employer and related entity(s)

|  |
| --- |
| Please indicate which component and provide reason(s) why the component must be purchased from a related entity/ sole provider. |

* **By ticking, it is confirmed that the same set of requirements are provided to all the Vendors.**

Remarks (if any or unticked (Justification is required))

|  |
| --- |
| Please provide the reason(s) on why the same set of requirements are not provided to all the Vendors. |

|  |  |
| --- | --- |
| Supporting documents for sole provider component (If any) | For attachment file… |

|  |  |
| --- | --- |
| Please select your organisation type | Company/ Society |

**Additional documents required for application**

|  |
| --- |
| **Attachments** |
| **S/N** | **File Type** | **File Name** |
| 1 | (For companies)* Latest ACRA Business Profile dated within 6 months from the date of Grant application **\***
 | For attachment file… |
| 2 | (For society)* Latest ROS Annual Return or ROS Search via MHA’s website **\***
 | For attachment file… |
| 3 | CTC-endorsed training plan (e.g. CTC NTUC / Worker rep signature withdate/time stamp within the training plan or endorsement via email with training plan attached). **\***Please note that the training plan should include, but is not limited to, the following details:* Number of training hours
* Committed worker outcomes
* Name of Training Provider(s) (if applicable)
* UEN of Training Provider(s) (if applicable)
* Training Start Date (dd/mm/yyyy)
* Training End Date (dd/mm/yyyy)
* Course Title
* Course Code (if applicable)

NTUC / Worker rep:* Unionised CTCs: President of Union, Executive Secretary (ES), General Secretary (GS)
* U SME CTCs: Director of U SME
* Other CTCs: Cluster Super Lead
 | For attachment file… |
| 4 | More information on Transformation Plan, if applicable (please keep to maximum of 2 pages) **\*** | For attachment file… |
| 5 | (For External Training Only)* Please provide Training Course Brochure/EDM by Training Provider \*
 | For attachment file… |
| 6 | CTC endorsement for the project**\***\*Mandatory field for New project submission on and from 24/03/2025 onwards | For attachment file… |

**SECTION 5 OF 5: DECLARATION BY APPLICANT-EMPLOYER**

"Applicant" or "you" refers to the company or business applying for this grant, e.g a sole proprietorship, partnership, limited liability partnership, or private limited company.

* **By ticking, I hereby declare that the transformation plan and/or training plan has been discussed with and endorsed by the NTUC / worker representative of my CTC (refer to Annex A below).**
* **By ticking, I hereby declare that the information provided in this project application is truthful and accurate, and will be used by e2i to evaluate this application for the CTC Grant. I am authorised to complete and submit this project application on behalf of my organisation.**

**ANNEX A: NTUC / WORKER CTC REP TABLE**

Please refer to the table below for information on who can be your senior management representative and who is your CTC’s NTUC / Worker representative.

|  |  |
| --- | --- |
| **Categories** | **Information** |
| Senior management reps | Senior management is one who is able to make business and workforce decisions for the entity (e.g. Owner / Chairman / President / Director / Managing Director (MD) / Chief Executive Officer (CEO) / General Manager (GM)). |
| NTUC / Worker rep | Unionised CTCs: President of Union, Executive Secretary (ES), General Secretary (GS). |
| U SME CTCs: Director of U SME |
| Other CTCs: Cluster Super Lead |

**SIGN OFF BY SENIOR MANAGEMENT OF THE APPLICANT-EMPLOYER (E.G. OWNER, CHAIRMAN, PRESIDENT, DIRECTOR, MD, ED, CEO, COO, GM)** **\***

|  |  |
| --- | --- |
| Salutation & Name **\*** | Type here… |
| Designation **\*** | Type here… |

1. [↑](#footnote-ref-1)