

Application for P-Max Place-and-Train Programme @ SMF

IMPORTANT INSTRUCTIONS:

All fields in this form are compulsory. Where information is not applicable, please indicate "N.A."
 When requested, original signed copy and cheque for SME/PME Workshop must be received by the SMF Centre for Corporate Learning Pte Ltd (SMF CCL) at 2985 Jalan Bukit Merah, Singapore 159457
 Application form must be submitted with the latest ACRA instant information (not more than 6 months from date of application)
 SMF CCL and WDA may request for further documentation including but not limited to financial statements, to support the application.
 SMF CCL and WDA have the right to approve or reject any application in their absolute discretion. Any rejection by SMF CCL and/or WDA shall be final, and no appeals will be entertained.
 This application form will take about 10-15 minutes to complete

1. COMPANY INFORMATION

Registered Company Name	
Unique Entity Number (UEN)	
Correspondence Address	
Key Business Activity	
Number of Staff	
SME Contact Person	
Contact Number	
Email	
Related Companies	
If Any, Brands & Number of Outlets [E.g. Brand A(7); Brand B(10)]	
Overseas Offices: (please state country/countries)	
Company's Annual Sales Turnover (S\$)	

2A. SHAREHOLDER'S DETAILS

Shareholding Details for holdings of more than 50%: Corporate shareholders & any subsequent corporate parents; and subsidiaries

Name of Company	
Unique Entity Number (UEN)	
Relationship	
No. of Staff	
%Share	

2B. HOLDING GROUP COMPANY (IF APPLICABLE)

Financial Year	
Group Annual Sales Turnover (S\$)+	
Group Staff Strength	

+This refers to the consolidated group turnover of the ultimate corporate parent of the Group

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3. MANPOWER REQUIREMENTS

Programme Requirements;

Offer PME job vacancies (to Singapore Citizen or Permanent Resident) available within the SME, which offers a gross monthly salary of at least S\$2,500; and/ or

Hired a PME (Singapore Citizen or Permanent Resident) within the last three months (i.e. 90 days) prior to enrolment into programme, offering a gross monthly salary of at least S\$2,500

No. of Professional vacancy(s)	
No. of Managerial vacancy(s)	
No. of Executive vacancy (s)	

Job Description (A)

Industry Sector	
Job Title	
Department	
Salary Range	
Job Responsibilities	
Working Hours (i.e Shift / 5½ work week / Alternate Saturday)	

Job Description (B)

Industry Sector	
Job Title	
Department	
Salary Range	
Job Responsibilities	
Working Hours (i.e Shift / 5½ work week / Alternate Saturday)	

Job Description (C)

Industry Sector	
Job Title	
Department	
Salary Range	
Job Responsibilities	
Working Hours (i.e Shift / 5½ work week / Alternate Saturday)	

4. TERMS OF PARTICIPATION

The applicant agrees to have meet the following programme requirements:

- a. SME and Programme eligibility requirements;
- b. Not a receipt of "Assistance Grant" from earlier "Max Talent" Place-and-Train (PnT) Programme or another PnT Programme under P-Max;
- c. Offer PME job vacancies (to Singapore Citizen or Permanent Resident) available within the SME, which offers a gross monthly salary of at least S\$2,500; and/ or
- d. Hired a PME (Singapore Citizen or Permanent Resident) within the last three months (i.e. 90 days) prior to enrolment into programme, offering a gross monthly salary of at least S\$2,500
- e. Successfully retain newly-hired PME(s) for at least six months upon both SME and PME workshops completion under the Programme; and
- f. Endorsed by Programme Manager to have successfully completed SME and PME post-workshop six month follow-up template

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5. DECLARATION BY APPLICANT

I declare that the Applicant Company:

- a. has at least 30% local shareholdings as at the application date
- b. is free from any litigation
- c. commits to the terms of participation set out in part 4 of this application form; and

d. The facts stated in this application and the accompanying information are true and correct to the best of my knowledge and that I have not withheld/distort any material facts. I understand that if I obtain the grant by false or misleading statements, I may have the grant withdrawn and recover immediately from my company any amount of the grant that may have been disbursed.

Name/Designation/Signatory

**Only the sole proprietor, partner or company director of the applicant company, as registered with ACRA or professional bodies, may authorise this declaration. Please provide full name as per ACRA registration.*