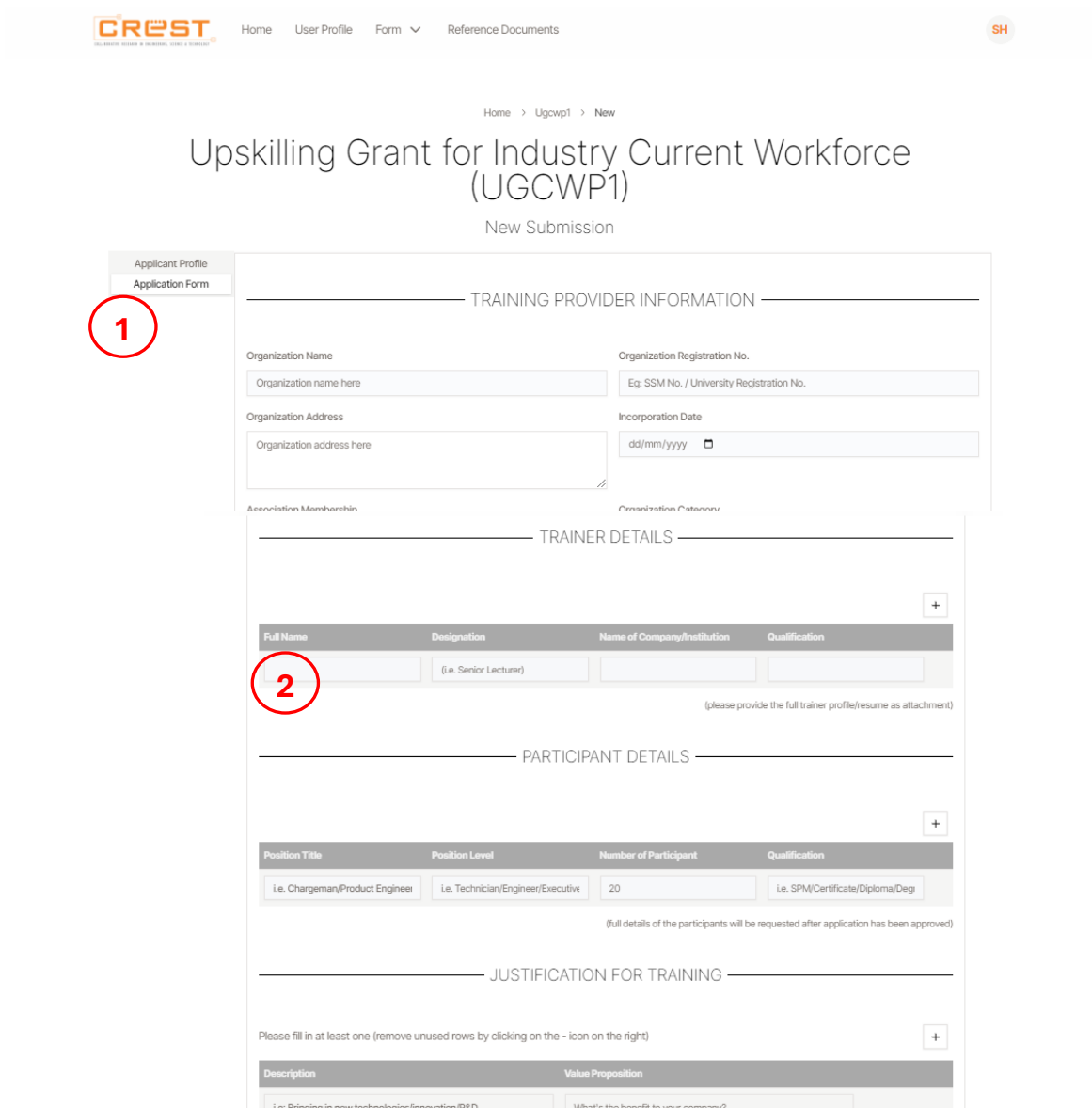


User Guide Manual-Application Submission

Upskilling Grant for Industry Current Workforce (UGCWP1)

1. You may begin your application by clicking on the “Application Form” button fill the form with all the details required.
2. For “Trainer Details”, “Participant Details”, and “Justification for Training” you need to click the “+” button to start fill in the details.
3. Please merge trainer’s supporting documents accordingly and upload it in PDF format (maximum size is 60 MB) by clicking the “Choose File” button.
4. You need to read and scroll full length the General Terms and Conditions as well as the Personal Data Protection Act Consent to enable the “I agree” and “Submit”.



Home > Ugcwp1 > New

Upskilling Grant for Industry Current Workforce (UGCWP1)

New Submission

1

Applicant Profile
Application Form

TRAINING PROVIDER INFORMATION

Organization Name: Organization name here

Organization Registration No.: Eg: SSM No. / University Registration No.

Organization Address: Organization address here

Incorporation Date: dd/mm/yyyy

Accreditation Membership: Accreditation Category

TRAINER DETAILS

2

Full Name	Designation	Name of Company/Institution	Qualification
	(i.e. Senior Lecturer)		

(please provide the full trainer profile/resume as attachment)

PARTICIPANT DETAILS

Position Title	Position Level	Number of Participant	Qualification
i.e. Chargeman/Product Engineer	i.e. Technician/Engineer/Executive	20	i.e. SPM/Certificate/Diploma/Deg

(full details of the participants will be requested after application has been approved)

JUSTIFICATION FOR TRAINING

Please fill in at least one (remove unused rows by clicking on the - icon on the right)

Description	Value Proposition
i.e. Bringing in new technologies/innovation/R&D	What's the benefit to your company?

Document Checklist

(Accept PDF Only, Maximum Size is 60MB)

3

Item	Upload
Training Provider's Profile (Company background, company management details, company products/services/activities)	Choose File No file chosen
Training Provider's Supporting Document (Form 9, Form 24, Form 49, Audited Report, Annual Return past 2 years, Memorandum and Article of Association and other relevant documents)	Choose File No file chosen
Training Brochure (Training quotation to company, training description, training schedule which includes training topics, training scope per topic, training hours per topic and name of each trainer per topic)	Choose File No file chosen
Trainer's Profile (Trainer education/professional qualification, training experience, supporting documents such as certificate for professional trainer i.e HRDF certified trainer, NIOSH TTT)	Choose File No file chosen
Training Provider PDPA Form	Choose File No file chosen
Supporting Documents	Choose File No file chosen

⚠ The following documents are mandatory otherwise your application submission will be rejected and you will be required to resubmit your application.

No.	Documents	Description
1.	Training Provider's Profile	<p>Please ensure that all documents are included and merge in pdf format before uploading them:</p> <ul style="list-style-type: none"> • Company Background • Company Management Details/Organisation Chart • Company's Product, Services and Activities
2.	Training Provider's Supporting Documents	<p>Please ensure that all documents are included and merge in pdf format before uploading them:</p> <ul style="list-style-type: none"> • Form 9 • Form 24 • Form 49 • Audited Report • Annual Return past 2 years, • Memorandum and Article/Constitutions
3.	Training Brochure	<p>Please ensure that all documents are included and merge in pdf format before uploading them:</p> <ul style="list-style-type: none"> • Training quotation to company • Training description • Training schedule which includes training topics, training scopes per topic, training hours per topic and name of each trainer per topic.

4.	Trainer's Profile	Please ensure that all documents are included and merge in pdf format before uploading them: <ul style="list-style-type: none"> • Trainer education/professional qualification • Training experience • Supporting documents such as certificate for professional trainer i.e HRDF certified trainer, NIOSH TTT)
5.	Training Provider PDPA Form	Please ensure that all documents are included and merge in pdf format before uploading them
6.	Supporting Documents	Please specify the documents if applicable

DECLARATION BY APPLICANT

Agreement Information

We hereby declare that:

1. All information stated here are true, accurate and in agreement with the terms and conditions of this program. CREST has the right to reject or to cancel the offer without prior notice if there is any inaccurate information given.
2. No corrupt practices, unlawful and/or illegal activities have been committed during submission of this application.
3. We have read and agree with the following terms & conditions.

1. Terms and Conditions

expose CREST to civil or criminal proceedings.

v. Applicants must adhere to requirements re eligibility criteria, application deadlines, supporting documents, and submission formats as specified by CREST.

vi. By submitting an application, applicants consent to the processing of their personal data and sensitive personal data (as defined in the Personal Data Protection Act 2010) for the purposes of the Program and further agree and undertake to comply with all applicable personal data protection laws in respect of personal data submitted to CREST as part of the application.

vii. CREST reserves the right to amend these terms and conditions, including the application process and relevant guidelines, at any time.

I Agree

5

Submit