

GE-SPRING-SBF Corporate Leadership Programme
9-12 Nov 2009

**APPLICATION FOR
ADVANCED MANAGEMENT PROGRAMME**



Instructions

1. Please write clearly in BLOCK LETTERS. Complete all sections and indicate 'NA' for items not applicable.
2. False particulars or intentional withholding of information will disqualify the application, or if already awarded, terminate the grant and recovered immediately from applicant any amount of the grant that may have been disbursed
3. SPRING will not enter into correspondence with regard to reasons for unsuccessful applications.

SMEs must fulfil criteria (A) and (B), **OR** (A) and (C).

(A) Size and growth

- At least S\$10 million in annual sales turnover#, or
- At least S\$5 million in annual sales turnover# and company growth exceeding industry average, or
- At least 50 staff and company growth exceeding industry average

(B) Markets

- Revenue from overseas markets, including sales from non-domestic sources, foreign exports, or sales bound overseas via local intermediary

(C) Operations

- Investments in foreign operations, or
- Multiple establishments^
- SMEs are defined as companies with at least 30% local shareholding, group fixed assets below S\$15 million and less than 200 employees

Turnover to include only value added products and services

^ Examples of establishments include outlets, factories, facilities

PART 1 – COMPANY / APPLICANT DATA

1. General

a Name of Executive Programme applied for:

b. Registered Name of Company with Accounting & Corporate Regulatory Authority (ACRA)
- (Please also provide a copy of the latest ACRA report – dated not more than 12 months)

c. Full Name of Applicant (as in NRIC) (Mr / Ms / Mrs / Mdm – please delete accordingly)

d. Designation

e Nationality

(Singapore Citizen / Singapore PR / Others)
- if Others, please specify

f. Date of Birth (dd/mm/yyyy)

g Highest Qualification Obtained

h. Address

Postal Code:

i. Tel no (office)

j. Mobile no (optional)

k. Fax no

l. Email

m. Company's website

n. Business Activity

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o. No of Staff

p. Year Incorporated

q. Paid up Capital (S\$)

r. Company Sales (Past 3 Years)

	Year	Year	Latest FY
(S\$)			

s. Overseas financial performance

(sales from non-domestic sources, foreign exports, or sales bound overseas via local intermediary)

Country	% revenue

t. Investment in foreign operations

Country	Type of activity

u. Number of establishments (includes offices, outlets, factories, warehouses or other facilities)

Local		Overseas	
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2. Shareholding details

- a. Shareholding details of applicant company (attach separate sheets if space provided is insufficient)

Name of shareholders / sole proprietors / partners (individual or company)	Nationality ¹ / Country Registered ²	% Share (Percentage of shareholdings must total up to 100%)	For Corporate Shareholders Only		
			Business Activity	No of Staff	Fixed Asset Investment at NBV (S\$)

¹ Applies to individual shareholder, please state if he/she is a Singapore Citizen, Singapore PR or Others

² Applies to shareholders that are companies. For corporate shareholders holding 20% or more of the total shareholding of applicant company, please provide ACRA report and the shareholding details of the corporate shareholders in a separate sheet (information required is similar to the Table 2a.)

- b. Details of companies where applicant company holds 50% or more of the total shareholding in subsidiaries or other companies (attach separate sheets if space provided is insufficient)

Name of Company	Country Registered	Business Activity	No of Staff	Fixed Asset Investment at NBV (S\$)	% Share

3. Fixed Assets Details

	Year _____	Year _____	Latest FY _____
Fixed Asset Investment at <u>Net Book Value</u> (S\$)			

PART 2 – DECLARATION BY APPLICANT

4. I declare that:

- a. My company, has at least 30% local shareholding, is not part of a group of companies whose Fixed Asset Investments (FAI) exceeds S\$15 million at net book value and does not employ more than 200 workers (for service sector);
- b. The facts stated in this form are true and correct to the best of my knowledge and that I have not withheld/distorted any material facts. **I understand that if I obtain the grant by false or misleading statements, the grant may be withdrawn and recovered immediately from me any amount of the grant that may have been disbursed.**

Signature: _____

Name: _____

Date: _____

Designation: _____