

**CAREER SUPPORT PROGRAMME  
NOTIFICATION FORM**

By acknowledging on the Career Support Programme (“**CSP**”) notification form (the “**Notification**”), you have accepted all Terms and Conditions (set out below) pertaining to the CSP. This will be a contract between you and the Workforce Singapore Agency (“**WSG**”).

**Terms and Conditions**

1. If you are submitting the Notification on your own behalf (the “**Employer**”), you have hired / or intend to hire a New Hire (“**New Hire**”) who fulfils the following conditions:-

Age	Singapore citizen aged <u>below forty (40)</u>	Singapore citizen aged <u>forty (40) and above</u>
<b>New Hire’s CSP criteria</b>	Unemployed and actively looking for jobs for six (6) months or more	Made redundant; <u>OR</u>  Unemployed and actively looking for jobs for six (6) months or more
<b>Employer’s CSP criteria</b>	(i) On an employment contract on permanent terms or on contract terms that are no less than one (1) year; and (ii) Draws a gross monthly salary* of at least \$4,000 (or at least \$3,600 for Small and Medium-Sized Enterprises (“ <b>SMEs</b> ”))	

\* The sum of the New Hire’s basic monthly salary and any fixed monthly allowance

2. You are required to submit the Notification, within three (3) calendar months of the New Hire’s employment commencement and the following supporting documents (i) Scanned copy of official employment letter/contract and (ii) Scanned copy of NRIC (front and back).
3. You are required to submit the completed claim form together with relevant supporting documents (as stipulated in the claim form), when claiming for grant (“**Grant Claim**”).
4. If the New Hire is identified as an Individual barred from receiving grants from WSG / SkillsFuture Singapore (“**SSG**”) / Employment and Employability Institute (“**NTUC’s e2i**”), you will not be eligible for CSP funding.
5. You agree that WSG or NTUC’s e2i is entitled, through its Audit Agents, to conduct ad-hoc on-site audits. The Employer shall ensure that WSG/NTUC’s e2i’s Audit Agents are given full access to all accounts, records, documents, assets and premises in connection with the grant, and shall provide reasonable cooperation and assistance.
6. If you are submitting the Notification for and on behalf of the Employer (the “**Agent**”), you shall procure that the Employer’s New Hire fulfils the conditions stated in clause 1 above and submit a scanned copy of the letter of authorisation (in the format attached in **Schedule 1** hereto) (the “**Authorisation Letter**”), duly signed by the Employer.
7. If you are an Agent, you further represent, warrant and undertake that:-
  - (a) you are duly authorised, for and on behalf of the Employer, to submit the Notification and Grant Claim relating to the Employer’s New Hire; and
  - (b) you shall forthwith transfer any and all Grant received under any Grant Claim to the Employer after your receipt of the same
8. WSG shall be entitled to, immediately by written notice to you, recover any Grant disbursed to you in any Grant Claim in any of the following events:-
  - (a) you have breached or not satisfied any of the terms and conditions set out herein; and
  - (b) you have furnished inaccurate, false or incomplete information in the Notification or any Grant Claim or any other documents relating to the CSP

**Acknowledged by:-**

Name & Designation (HR or hiring manager equivalent)	Company Stamp & UEN no.	Signature & Date
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Name & Designation of Contact Person (if different from above)	Email address & Contact number (of contact person)
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**DETAILS OF NEW HIRE**

**[All fields are compulsory]**

**Self-Declaration: \*Please 'tick' the appropriate box**

- (i) Are you unemployed for ≥12months?  Since: \_\_\_\_\_ [i.e. DD/MM/YYYY]
- (ii) Are you unemployed for 6 to <12months?  Since: \_\_\_\_\_ [i.e. DD/MM/YYYY]
- (iii) Are you made redundant?  Since: \_\_\_\_\_ [i.e. DD/MM/YYYY]
- (iv) Are you currently tapping on any other programs? PCP  P-Max  CLT  N.A

**[For PCP /CLT only]**

Start Date of PCP/CLT: \_\_\_\_\_ End Date of PCP/CLT: \_\_\_\_\_ Funding duration: \_\_\_\_\_ [months]

Name of PCP: \_\_\_\_\_

*\*Note: CSP funding will commence one day after end date of PCP*

<b>NRIC:</b>		<b>Citizenship:</b>	<input type="checkbox"/> Singaporean Citizen
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<b>Name (as per NRIC):</b>	<b>Race:</b>	
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<b>Gender:</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Date of Birth:</b>		<b>Age:</b>	
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(Day/Month/Year)

<b>Address: (as in NRIC)</b>	Postal code: (                      )
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<b>Contact:</b>	[Home]	[Mobile]
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<b>Email:</b>	
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<b>National Service:</b>	<input type="checkbox"/> Completed <input type="checkbox"/> Exempted <input type="checkbox"/> Serving, NS Men <input type="checkbox"/> Not Applicable
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<b>Highest Academic Qualification:</b>	<input type="checkbox"/> No Formal Education <input type="checkbox"/> Primary education <input type="checkbox"/> PSLE <input type="checkbox"/> Secondary education <input type="checkbox"/> 'N' levels <input type="checkbox"/> 'O' levels <input type="checkbox"/> NTC2 / NTC3 / NITEC <input type="checkbox"/> ITC / Higher NITEC <input type="checkbox"/> 'A' Levels <input type="checkbox"/> Diploma <input type="checkbox"/> Professional Cert. <input type="checkbox"/> Degree <input type="checkbox"/> Masters / Post Grad
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**Work Experience:**  
 Refer to enclosed resume; Please start with your current or most recent job

From Date (MM/YYYY)	To Date (MM/YYYY)	Job Title	Company Name	Last Drawn Salary

<b>Current/ Prospective work details:</b>	<input type="checkbox"/> Permanent <input type="checkbox"/> Contract ( _____ years)									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Industry:</td> <td style="width: 30%;">Job Title:</td> <td style="width: 30%;">Gross Monthly Salary*:</td> </tr> <tr> <td colspan="2">Company Name:</td> <td>*Please Circle: SME / Non-SME</td> </tr> <tr> <td colspan="3">Date of Employment Commencement (date CSP will commence):</td> </tr> </table>	Industry:	Job Title:	Gross Monthly Salary*:	Company Name:		*Please Circle: SME / Non-SME	Date of Employment Commencement (date CSP will commence):		
Industry:	Job Title:	Gross Monthly Salary*:								
Company Name:		*Please Circle: SME / Non-SME								
Date of Employment Commencement (date CSP will commence):										

**To be completed by New Hire:**

I declare that the information provided in this 'Details of New Hire' is true, accurate and complete to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*The sum of the New Hire's basic monthly salary and any fixed monthly allowance*

Authorisation Letter

Schedule 1

Date: \_\_\_\_\_

To:

(1) Workforce Singapore Agency
1 Marina Boulevard, #18-01
One Marina Boulevard
Singapore 018989

(2) [Name & Address of Agent]

Dear Sirs,

LETTER OF AUTHORISATION TO APPLY AND CLAIM FOR GRANTS ON OUR BEHALF UNDER THE WORKFORCE SINGAPORE AGENCY'S ("WSG") CAREER SUPPORT PROGRAMME ("CSP")

- 1. We, \_\_\_\_\_[Name of Employer], hereby authorise \_\_\_\_\_[Name of Agent] (the "Agent"), \_\_\_\_\_[Unique Entity Number] to apply and claim for grants, for and on our behalf, under the CSP for \_\_\_\_\_[Name of new hire], \_\_\_\_\_[NRIC].
2. Without prejudice to the generality of the above, the Agent may, for and on our behalf:-
(a) submit an application form to WSG to be enrolled under the CSP;
(b) submit any and all claim forms to WSG relating to our employees' claims;
(c) accept any terms and conditions that may be imposed by WSG under the CSP; and
(d) do all such acts and things that may be necessary, expedient or desirable in connection with the application and claim for CSP grants.
3. This letter of authorisation shall be valid from the date above-written for a period of \_\_\_\_\_ [Duration of CSP funding] year(s) unless sooner revoked on express written notice being given to WSG and the Agent.

For and on behalf of \_\_\_\_\_ [Name of Employer],

Name:
NRIC / Passport No:
Designation:

Company Stamp