

## Singapore Business Leaders Programme (SBLP) 5 - 10 May 2019

Thank you for your interest in our programme. Kindly fill in all the fields below and return your completed forms to us. For enquiries, please email [programmes@hcli.org](mailto:programmes@hcli.org), or your client engagement representative.

### A. PERSONAL INFORMATION

Salutation <input type="text"/>	Family Name (As per passport/NRIC) <input type="text"/>	Given Name (As per passport/NRIC) <input type="text"/>
Gender <input type="text"/>	Date of Birth <input type="text"/>	Nationality <input type="text"/>
Preferred Name (To be displayed on name badge) <input type="text"/>		
NRIC No (for Singaporeans/PRs) <input type="text"/>	Passport/FIN No (for foreigners) <input type="text"/>	Preferred Name (To be displayed on certificate) <input type="text"/>
Location of Participant (Country/City): <input type="text"/>	Dietary Restriction (if any) <input type="text"/>	

### B. PROFESSIONAL/BUSINESS INFORMATION

Organisation Name <input type="text"/>	Designation/Title <input type="text"/>
Business Correspondence Address <input type="text"/>	Office Telephone Number (incl country code) <input type="text"/>
	Business Mobile Number <input type="text"/>
Business Email <input type="text"/>	

Designation of the Person to Whom You Report:

Years of Relevant Work Experience: <input type="text"/>	Years of Relevant Management Experience: <input type="text"/>	How Many People Report to You (Directly) <input type="text"/>
Your Company's Number of Employees: <input type="text"/>	Your Company's Annual Turnover (USD) <input type="text"/>	How Many People Report to You (Indirectly) <input type="text"/>

### C. EMPLOYMENT HISTORY (Please list your last two positions)

1. Name of Company <input type="text"/>	Start Date <input type="text"/>
Designation <input type="text"/>	End Date <input type="text"/>

2. Name of Company

Start Date

Designation

End Date

**D. PERSON LIAISING ON PARTICIPANT S BEHALF (where applicable)**

Salutation

Family Name (As per passport/NRIC)

Given Name (As per passport/NRIC)

Designation/Title

Email

Office Telephone Number (incl country code)

**E. DETAILS OF COMPANY HR HEAD/DIRECTOR**

Salutation

Family Name (As per passport/NRIC)

Given Name (As per passport/NRIC)

Designation/Title

Email

Office Telephone Number (incl country code)

**F. INFORMATION TO SHAPE THE SBLP LEARNING JOURNEY (Section to be filled in by Participant)**

1. Please describe your current responsibilities, including your position in the company

2. Desired Objectives

**What are your personal objectives and goals for attending SBLP 2019?**

3. Work Context

**What are your top of mind “what-ifs” (trends/ scenarios) that you believe will have significant impact on your business/organisation?**

**What are your current key markets, globally and within Asia?**

## G. INFORMATION TO BE COMMUNICATED EXTERNALLY

### 1. THE PARTICIPANT & COMPANY/ORGANISATION

- Biography of participant (in narrative format, 150-200 words)
- Photo of participant  
(profile image, colour, high resolution - 300 dpi, approximate file size of 800kb)

\*Please send the above two documents as separate files (do not incorporate the photo into the biography), together with completed Registration Form.

### 2. REQUEST FOR CONSENT / DATA PROTECTION AND USE OF PERSONAL DATA (PDPA)

#### SHARING OF PARTICIPANT INFORMATION WITH PROGRAMME AUDIENCE

I consent to my name, biography, photo, and company/organisation's profile being uploaded on the programme website/app. Viewing access will be restricted via login to programme organisers, speakers and other participants. I consent to my contact details being shared with other participants of the programme, and to be contacted by them after this Registration Form has been submitted to the programme organisers.

#### DATA PROTECTION AND USE OF PERSONAL DATA (PDPA)

By submitting this application form to HCLI, I agree that any personally identifiable data that I have provided may be:

- i. used by HCLI for the organisation and administration of programmes (including profile preparation in connection with the programme, where applicable);
- ii. used and retained by HCLI for communicating with, and informing me about HCLI activities and programmes (by post, email, or telephone); and/or
- iii. disclosed by HCLI (only relevant personal data as necessary) to service providers or partners that may be engaged in connection with the programme.

If I would like to request access to, or to correct, or to withdraw consent to HCLI's use of my personal data after submitting this form, or if I have questions on how HCLI deals with personal data, I may send an email to the programme organiser at [programmes@hcli.org](mailto:programmes@hcli.org)

If I am providing someone else's personal data or submitting this form on behalf of someone else, I hereby declare that I have obtained consent from the named individual in this form, for the collection, use and disclosure of his/her personal data by me to HCLI, HCLI business partners and other third-party service providers.

#### PERMISSION FOR INTERVIEWS

I am open to participating in HCLI-driven interviews: Content from these interviews may be used for articles on HCLI's online portal, HQ Asia ([www.hqasia.org](http://www.hqasia.org)). In such cases, HCLI will clear the final draft with the interviewee before the final outcome is communicated externally beyond HCLI.

Should I wish at any time to withdraw my consent for the collection, use and/or disclosure of my personal data after submitting this form, I may contact the data officer at [programmes@hcli.org](mailto:programmes@hcli.org).

## H. PROGRAMME FEE

Programme Fee: SGD\$32,000 per participant (subject to GST)

Any and all taxes that may be imposed under the applicable laws, shall be borne by the Client.

Programme Fee includes:

1. Course materials
2. Daily coffee breaks and lunch
3. Hosted dinners during the programme
4. Ground transport arrangement for dinner(s) located out of accommodation venue
5. Accommodation during the programme dates (5 nights' stay, inclusive of daily buffet breakfast)

## I. PAYMENT DETAILS

Payment of Programme Fee has to be made by 1 April 2019.

Kindly indicate your payment mode:

By Cheque

By Telegraphic Transfer

By Vendor@ Gov

**Cheques** should be crossed and made payable to “**Human Capital Leadership Institute Pte Ltd**”, accompanied by a copy of the completed registration form.

**For Telegraphic Transfer** (All applicable bank charges to be borne by the remitting party):

Account Name: Human Capital Leadership Institute Pte. Ltd.

Bank: DBS Bank Ltd

Branch /Account Number: 7171-003-925396-6

SWIFT Code: DBSSSGSG

Please advise whom we should address our invoice to:

Name

Organisation

Designation

Business Email

Office Telephone Number

Business Correspondence Address

## TERMS & CONDITIONS

### ADMISSION AND PAYMENT POLICY

- (i) HCLI reserves the right to refuse admission if payment is not received in full before the programme commencement.
- (ii) Fees will be charged accordingly if a participant fails to attend the programme without notice after application.

### CANCELLATION POLICY

- (i) HCLI must be informed in writing of cancellations (if any). The following charges apply for all cancellations:
  - a. Up to 8 weeks before programme - No charge; full refund of the programme fee
  - b. 8 weeks to 4 weeks before programme - 50% of programme fee will be charged
  - c. Less than 4 weeks before programme - 100% of programme fee will be charged
- (ii) A candidate who is unable to attend can be substituted on the same programme without incurring any fees. The substitute needs to apply and be admitted.
- (iii) All details of the programme are correct at the time of printing. HCLI reserves the right to cancel or postpone the programme, change the venue or any of the other details published. A full refund will be given in the event HCLI cancels the programme.

### INTELLECTUAL PROPERTY

Participants agree to respect all intellectual property rights in the programme, including the programme structure, content, materials and proceedings.

### DECLARATION BY APPLICANT

I declare that the information given above is factually correct, and that I meet all the admission requirements for this programme. I agree to respect all intellectual property rights in the programme, including programme structure, content, and materials. By submitting the form, I, the applicant, accept the terms and conditions of HCLI.

(Signature above this line)

Name

Date