

MOHHoldings

MOH Holdings Pte Ltd (Reg No: 198702955E)

TITLE:

**Sponsorship For Overseas Courses
And Conferences**

EFFECTIVE DATE:

18 May 2008

REVISION DATE:

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PAGES: 5

PROCESS OWNER:

Clinical Manpower Division

APPROVAL:

**Director, Clinical Manpower Division
Chairman, Professional Sub Committee**

OBJECTIVE

1. This policy provides guidelines on the application for sponsorship of overseas courses and conferences. The term 'conference' refers to similar events that may be known as congress, symposium, workshops, and seminars.

POLICY

2. This policy sets the approval procedure for the sponsorship, claimable items and reimbursement of expense claims.
3. All MOHH-employed Medical and Dental Officers who undergo posting exercise are eligible to apply for this award.
4. Sponsorship provided by MOHH is intended as a form of financial assistance to the medical staff. It may not cover all expenses that arise and the staff may expect to incur some expenses on his/her own.

APPLICATION CRITERIA

5. Applicants presenting a paper / poster at conferences will receive priority for sponsorship and is limited to one meeting per year. Applicants applying for more than one sponsorship per year may be granted approval only under exceptional circumstances e.g. presenting a 1st author paper in a Tier 1 Journal.
6. The selection meeting for the award will be made 4 times a year, i.e. 31st May, 31st August, 30th November and 30th March in order for applicants to qualify for June's, September's, December's and March's applications respectively.

APPLICATION PROCESS & APPROVAL

7. In order to be eligible for sponsorship, applicants are required to complete the 'Overseas Courses and Conferences Sponsorship Form for Applicant' (Appendix A) and obtain approval before leaving for the conference.
8. All applications must be accompanied by a recommendation by The Head of Department (Annex A, Section II) and the application form has to be sent to the Professional Sub-Committee for evaluation via MOHH Clinical Manpower Division.
9. The completed form together with the following documents is to be submitted to Secretariat of the Professional Sub-Committee:
 - Airfare quotation from travel agency
 - Abstracts & letter from the Organizer stating the day of presentation
 - Flyer / Brochure of the conference
 - Receipt / quotation for poster charges (if any)
 - Receipt for travel insurance (for standard/basic plans only)
 - Receipt for registration fees

10. The application will then be forwarded to the Professional Sub-Committee for approval.
11. Application forms can be sent to the Professional Sub-Committee either by mail, fax or via the MOHH drop boxes.
12. The applicant will be informed of the status via email.

CLAIMABLE ITEMS

13. Airfare
 - 13.1 The applicant is entitled to the most direct, economical route to the training destination.
 - 13.2 Stopovers due to personal cause have to be borne by the staff.
 - 13.3 Medical Officer Trainee can engage their preferred travel agent to purchase tickets. 3 written quotations are required for values exceeding \$2,000.
14. Subsistence Allowance
 - 14.1 Staff shall be provided with a daily Subsistence Allowance for the whole duration of the conference plus 1-day subsistence allowance for the days of travel to and from Singapore. Please refer to the 'Rates of Subsistence Allowance' list which will be updated from time to time by the Public Service Division (PSD). For one-day conferences i.e. depart and return on the same day, subsistence rate will be 30% of the full day rate for that country.
 - 14.2 Examples of the subsistence allowance calculations are shown below:
 - a) Actual overseas business duration is 1 Feb to 5 Feb (Monday to Friday). Staff arrives at destination on 31 Jan and departs for Singapore on 6 Feb (regardless of arrival and departure times).
Total number of subsistence days = 5 days + 1 day = 6 days.
 - b) Actual overseas business meeting is 1 April to 5 April (Friday to Tuesday of the following week). Staff arrives at destination on 31 Mar and departs for Singapore on 6 April (regardless of whether there is a meeting on Saturday or Sunday, subsistence will be provided.)
Total number of subsistence days = 5 days + 1 day = 6 days
 - 14.3 For those days that free meals and lodging are provided, an allowance equivalent to 10% of the eligible subsistence allowance will be paid, but not less than \$10.00 per day to cover incidental expenses.
15. Registration Fee
 - 15.1 Personal Training Fund should be used first to pay for registration fees.
 - 15.2 Registration fee is granted to attend main event
 - 15.3 Purchase of course and conference materials will not be considered as part of MOHH sponsorship.
 - 15.4 Where the activity is social and non-academic, the staff is expected to bear the cost if he/she intends to attend the activity.
16. Travel Insurance
 - 16.1 Travel insurance is granted only for coverage for the actual duration of training, including one day before and after the training.

- 16.2 Cost will be covered for standard/basic travel insurance plans only.
- 16.3 Staff will bear the travel insurance premium (if any) for extended trips that are not related to the purpose of the overseas conference and course.

17. Poster Charges

SPONSORSHIP

- 18. Sponsorship will be capped at **S\$ 4,500** for International Conferences and **S\$ 2,000** for Regional Conferences. The term 'International' refers to direct flights of 6 hours or more, and 'Regional' refers to direct flights of less than 6 hours.
- 19. If a paper has already been presented at an overseas conference, the staff is not eligible to apply for sponsorship for the same paper in other conferences.
- 20. Where several staff jointly author a paper, the sponsorship will be provided to only one applicant.
- 21. If the applicant is attending the conference as a participant, the amount claimable is 50% of the total eligible travel costs.
- 22. All other forms of sponsorship by external parties or other sources MUST be declared on the application form.

REIMBURSEMENT

- 23. Reimbursement claims should be submitted within 1 month from the return of the conference.
- 24. The original receipts/invoices have to be sent to the Professional Sub-Committee Secretariat for processing of claims.
- 25. Payment will be credited into staff's payroll.

ENQUIRY

For enquiries, please contact:

Ms Ginny Goh
ginny.goh@mohh.com.sg
DID: 6622-0988
Fax: 6720-0980

Address:
Professional Sub-Committee
c/o MOH Holdings Pte Ltd
83 Clemenceau Avenue #15-03
UE Square, Singapore 239920

**APPLICATION FOR SPONSORSHIP OF
OVERSEAS COURSES AND CONFERENCES**

Section 1: To be completed by Applicant

Name : _____ MCR No.: _____

Email : _____ Contact No.: _____

- Dental Officer Medical Officer Trainee (Speciality : _____)
 Medical Officer House Officer

Current Posting Hospital/Dept Posted : _____

Details of Conference/Course (Please attach course details/brochures)

Conference Title : _____

Capacity in which you are attending the event:

- Oral Presentation Poster Presentation
 Participation only Others, please specify : _____

Title(s) of Presentation at Conference (if any):

Country : _____ Duration : _____ Days

Start Date : _____ End Date : _____ Date of Presentation : _____

- Regional (less than 6 hours direct flight) International (more than 6 hours direct flight)

Registration Fee : _____ Airfare (estimate) : _____

Have you applied for any other sponsorship?

- No Yes Please specify : _____

I confirm the above paper has not been presented at any local/international conference before No Yes

I confirm the above paper has not been presented by other co-authors at any local/international conference before No Yes

I declare that the information which I have provided in this application is true and that breach of regulations or inaccurate information in the application will result in liability for severe punishment. I understand that approval of funding is conditional and subjected to the approval of Chairman, Professional Sub-Committee and Director, Clinical Manpower Division.

Applicant's Signature

Date

Section 2: To be completed by Head of Department

Recommended Please specify relevance/benefits of training programme to Applicant's job functions and development needs

Not recommended _____

Name/Designation/Signature

Date

Section 3: To be completed by Approving Personnel

Approved

Not Approved Reasons for not approving : _____

Chairman, Professional Sub-Committee
Signature & Date

Director, Clinical Manpower Division, MOHH
Signature & Date

Instructions :

Application forms can be forwarded to the Professional Sub-Committee by mail :

Professional Sub-Committee
c/o MOH Holdings Pte Ltd
83 Clemenceau Avenue #15-03
UE Square, Singapore 239920

Fax : 6720-0980

Email : physician@mohh.com.sg

or via the MOHH drop box at your Institution.