**GRANT APPLICATION FORM**

**(DIGITAL FOR LIFE FUND)**

**PROJECT TITLE:\***Provide a concise, descriptive title for your project, suitable for publicity materials. Avoid including words like "project" or "programme".

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**APPLICANT/REGISTERED COMPANY[[1]](#footnote-2) NAME:\***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COMPANY UNIQUE ENTITY NUMBER (UEN):\***

Not Applicable for Individual applicants

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**INFO-COMMUNICATIONS MEDIA DEVELOPMENT AUTHORITY**

**10, Pasir Panjang Road**

**#03-01 Mapletree Business City**

**Singapore 117438**

**Tel: (65) 6377 3800**

**Website:** [www.imda.gov.sg](http://www.imda.gov.sg)

**ALL INFORMATION PROVIDED WILL BE**

**HELD IN STRICTEST CONFIDENCE**

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| **USEFUL NOTES**   1. **Application**  * To assist us in evaluating your application speedily, please provide the requested information as completely and accurately as possible. If the space provided is insufficient, a separate sheet may be used. Where information is not yet available or not applicable, please indicate accordingly. * Please note that there is an existing attachment, i.e., budget excel form, in this document that you need to access. * You are advised to contact us should you have any difficulties in completing the form or if you need any further information. * Please submit only one copy of this application along with any relevant supporting documents. * Applicants may be contacted if further information is required.  1. **Structure of the Application Form**  * Part 1: Company Information * Part 2: Basic Information * Part 3: Contact Details * Part 4: Proposal * Part 5: Business Impact * Part 6: Project Cost Breakdown * Part 7: Declarations / Undertakings * Part 8: Annex A (Additional Information)  1. IMDA reserves the right to conduct interviews and on-site visits during the evaluation of the application. 2. The Organisation, by submitting this Application Form, undertakes not to disclose, divulge, or communicate to any person or party any Confidential Information, without first having obtained the written consent of IMDA.   “Confidential Information” means information in whatever form (oral, written, electronic, etc.) and documentation pertaining to IMDA, the Government of the Republic of Singapore, any third parties or the grant applied hereunder, that is disclosed to or obtained by the Organisation in relation to or in connection with the grant applied hereunder, including this Application Form.   1. Generally, IMDA funding received by organisations are taxable unless it is capital in nature (i.e. funding for infrastructure and fixed asset). 2. “Related-Party” means -    1. in the case of a natural person: a person or a close member of that person’s family related to the Recipient who has:       1. control or joint control of the Recipient;       2. has significant influence over the Recipient; or       3. is a member of the key management personnel of the Recipient or of a parent of the Recipient; or    2. in the case of an entity other than a natural person: an entity is related to the Recipient if any of the following conditions apply:       1. the entity and the Recipient are members of the same group of companies (i.e. either is a parent of, a subsidiary or share a parent company);       2. the Recipient is an associate or joint venture of the other entity (or an associate or joint venture of a member of a group of which the other entity is a member);       3. the Recipient and the entity share a third-party joint venture partner.       4. the Recipient is a joint venture of a third party entity and the entity is an associate of the third party entity, or vice versa;       5. the entity is a post-employment benefit plan for the benefit of the employees of either the Recipient or an entity related to the Recipient. If the Recipient is itself such a plan, the sponsoring employers shall also be related to the Recipient;       6. the entity is controlled or jointly controlled by a person identified in **(6)a.** above;       7. a person identified in **(6)a.i.** has significant influence over the entity or is a member of the key management personnel of the entity (or of a parent of the entity);       8. the entity or any member of a group of which it is a part of, provides key management personnel services to the Recipient or the parent of the Recipient. |
| **SUPPORTING DOCUMENTS TO BE SUBMITTED**  **Application**   1. Latest Organisation’s ACRA business profile dated not more than 6 months from the date of application submission, or other forms of registration documents (e.g., Annual returns for societies, etc.) bearing UEN of the organisation that is dated not more than 6 months from the date of application submission, if organisation is not ACRA registered. 2. Curriculum vitae for all project team members. 3. Documentation supporting proposed project costs, including recent quotations (preferably valid for 6 months), relevant invoices or receipts for similar items/services, or links to published rates.   **Financial Statements**   1. For companies (including associations, societies and charities) – Latest set of audited financial statements that are not more than 2 years from the current financial year end of the company. If latest set of audited financial statements are not available, then latest set of unaudited accounts (not more than 2 years from the current financial year end of the company) accompanied by a signed/endorsed Director (s) declaration form may be accepted in lieu of audited accounts with justification. 2. For audit exempt small companies – Latest set of unaudited accounts that are not more than 2 years from the current financial year end of the company, accompanied by a signed/endorsed Director (s) declaration form. Latest set of audited financial statements (not more than 2 years from the current financial year end of the company) should be used if available. 3. For businesses (e.g. sole proprietors, partnerships etc.) – Latest set of Profit & Loss Statement and Balance Sheet that are not more than 2 years from the current financial year end of the business, accompanied by a signed/endorsed Partner(s)/Owner’s declaration form. |

**PART 1: COMPANY INFORMATION**

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| **Company Information** (Not Applicable for Individual applicants) | | |
| **Registered Address\*** | | **Company Website** |
|  | |  |
| **Brief Description of the Company** | **Employment Size** | **Principal Activity\*** |
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**Is the applicant’s group sales turnover less than or equal to S$100 million or is the applicant’s groups employment size less than or equal to 200? \***



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| **Mandatory documents required** | |
| **Document required** (Not Applicable for Individual applicants) | **Attach below** |
| Organisation’s Business Profile**\*** |  |

**PART 2: BASIC INFORMATION**

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| --- | --- | --- |
| **Applicant Type Note: Select one or more options if applicable.** | | |
| **Individual** *(who is a Singapore Citizen or Permanent Resident, aged 18 years and above, and residing in Singapore)* | Yes | No |
| **Charity/ Charitable Trust** *(registered with the Commissioner of Charities)* | Yes | No |
| **Company Limited by Guarantee** *(registered with ACRA)* | Yes | No |
| **Society** *(registered with Registry of Societies)* | Yes | No |
| **Co-Operative** *(registered with Registry of Co-operative Societies)* | Yes | No |
| **Trade Union** *(registered with Registry of Trade Unions)* | Yes | No |

**PART 3: CONTACT DETAILS**

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| **Main Contact Person** |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name\***   |  | | --- | |  | | | | | | **Job Title\***   |  | | --- | |  | | | |
| **Country Code (e.g.+65)\***   |  | | --- | | **+65** | | | | **Contact No.\***   |  | | --- | |  | | | | **Email\***   |  | | --- | |  | | | | |
| **Country Code for Alternate Contact No.**   |  | | --- | | **+65** | | | | **Alternate Contact Person’s**  **Contact No. \***   |  | | --- | |  | | | | **Alternate Contact Person’s**  **Email\***   |  | | --- | |  | | | | |
| **Letter of Offer Addressee**  **Note:** This should be a director named in ACRA biz profile or a member of the Senior Management | | | | | | |

**Same as main contact person Note: If this checkbox is selected, you do not need to fill up the details below**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name\***   |  | | --- | |  | | | | | **Job Title\***   |  | | --- | |  | | | |
| **Country Code (e.g.+65)\***   |  | | --- | | **+65** | | | **Contact No.\***   |  | | --- | |  | | | | **Email\***   |  | | --- | |  | | | |
| **Country Code for Alternate Contact No.**   |  | | --- | |  | | | **Alternate Contact Person’s**  **Contact No.**   |  | | --- | |  | | | | **Alternate Contact Person’s**  **Email**   |  | | --- | |  | | | |

**PART 4: SUBMIT YOUR PROPOSAL**

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| **Proposal** |

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| **Start Date (dd/mm/yyyy)\***   |  | | --- | |  | | **End Date (dd/mm/yyyy)\***   |  | | --- | |  | | **Project Duration (in months)\***  Maximum project duration is 12 months.   |  | | --- | |  | |

**Project Description**\*  
Provide a concise overview of your project, including its objectives, target audience, and key activities. Highlight what makes your project unique or innovative.

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**Project Objective**\*  
Identify the digital gaps in Singapore's current landscape and describe how your project aligns with Digital for Life's objectives to address these gaps.

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**Project Scope**\*  
Outline your project's objectives, target demographic, and geographical coverage. Describe the digital-related focus areas or technology involved, method of content delivery, and anticipated impact on beneficiaries. Detail your specific, measurable outcomes, impact measurement approach, and outreach plans.

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**Project Remarks**Provide additional context or information such as any potential challenges or mitigation strategies. You may also highlight any unique aspects of your project or organization track record if you have done a similar project.

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| **Project KPIs**\*  **Provide at least 1 KPI on number of beneficiaries reached and 1 tracking indicator to measure project’s impact. Add more rows if required.** | | |
| **Name of KPI** | **Target Type** | **Value** |
| *KPI example:*  *Number of youths attending workshop on misinformation and disinformation.* | Number | *500* |
| *Tracking indicator example:*  *Percentage of respondents achieve 80% in a quiz on misinformation and disinformation.* | Percentage | 70 |
| Leave blank if not applicable | Select... |  |
| Leave blank if not applicable | Select... |  |
| Leave blank if not applicable | Select... |  |

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| **Project Deliverable**\*  **Deliverable #1 is mandatory as per our fund guidelines. Ensure that the project deliverables align with the KPIs listed in the KPI table. Tracking indicators should be excluded from this section.** | | |
|  | **Deliverable Name** | **Due Date (dd/mm/yyyy)** |
| 1 | Sign and return the Acceptance of Letter of Offer to IMDA | Click to select a date. |
| 2 | *Example:*  *Achieving KPI 1 or part thereof:*  *1) 500 youths attending workshop on misinformation and disinformation (“KPI 1”)* | Click to select a date. |
| 3 | Leave blank if not applicable | Click to select a date. |
| 4 | Leave blank if not applicable | Click to select a date. |

**PART 5: EXPLAIN THE BUSINESS IMPACT**

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| **Business Impact**\* |
| Describe how this project will impact your business? |
| Not applicable for Digital for Life Fund applications |

**PART 6: PROJECT COST BREAKDOWN\***

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**Note:** Save the Budget Form in Part 6 in your computer hard disk as a local copy, fill up the details and attach it in this application form. Submit your application form to IMDA via the FormSG link.

Once the budget has been approved, any changes will require IMDA’s official approval. Applicants are strongly advised to ensure that all costs submitted during the application stage are accurate and final, as budget modifications after approval are not recommended. IMDA reserves the right to cap the submitted costs during the evaluation period.

**PART 7: DECLARATIONS / UNDERTAKINGS**

**DECLARE & ACKNOWLEDGE TERMS**

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| 1. Has the applicant been or is currently —  * Being investigated for or charged with or convicted of any criminal offence or subject to any criminal proceedings; or * Subject to any disciplinary proceedings or regulatory action by any regulatory or licensing authority, in any jurisdiction in the last 5 years?**\*** | Yes | No |
| 1. Has the applicant been or is currently engaged in any civil suit or proceedings in any jurisdiction in the last 5 years?**\*** | Yes | No |
| 1. Has the applicant been or is currently —  * Bankrupt, wound-up or under judicial management; * Subject to any bankruptcy or winding up or judicial management proceedings; or * Has a receiver or manager appointed for the applicant?**\*** | Yes | No |
| 1. Has the applicant and/or Interested Party^ applied for or obtained any other grants or tax or sponsorships or financial incentives from the Singapore Government for this project?   *Note*   * “Interested Party” shall mean any person, whether a legal entity or natural person, who has an interest in the Project, whether through the provision of financing or contributions in kind. * “Contributions in kind” shall mean contributions to the Project other than in cash, including but not limited to the provision of manpower, and the loan or use of equipment.**\*** | Yes | No |
| 1. Has the applicant commenced on the project prior to this application, such as signing any contract and making any form of payment to any parties engaged in this project whether directly or indirectly (including but not limited to suppliers and service providers, subcontractor)?**\*** | Yes | No |
| 1. Do any of the suppliers and service providers engaged in this project have any relationship, connection, association or dealings with the Applicant or its related companies or their directors and shareholders?**\*** | Yes | No |
| The Applicant consents to the release of any information provided in this application or in support of this application or information on any consequential provision of grant by the Agency to other public agencies for the purposes of assessing the Applicant's suitability for their grant or other assistance schemes or for public policy analysis or formulation or public data analytics purposes, and to external auditors.  The Applicant acknowledges that the submission of this application does not, of itself, automatically entitle the Applicant to funding, and all project funding stated in this application is purely an estimation and will be subject to evaluation. The Applicant also understands that the funding shall be subject to such further terms and conditions as may be set out in the Letter of Offer, where applicable.  The Applicant acknowledges and agrees that it shall always act in good faith to comply with all applicable terms and conditions, conduct due diligence and exercise sound financial management in ensuring that: -  i. [the procurement of goods and/or services] is reasonably required by the Applicant and justified in the circumstances; and  ii. the amounts submitted in the Application Form are derived from quotations from legitimate vendors and/or represent fair value and/or are not inflated.   The Applicant acknowledges and agrees that it shall be undertaking the project at its own cost and risk. The Applicant agrees that in no event will the Agency be liable to the applicant for any direct or indirect losses or damages, including loss of income, profit or savings or indirect, incidental, special, consequential, or punitive damages arising from or in connection with this Application.  The Applicant understands and agrees that if any of the above declarations are found to be false or inaccurate, or if the Applicant breaches any of the agreements above, the Government has the right to suspend the disbursement of monies and/or other benefits under the grant, to revoke any grants issued, and to immediately recover all monies and/or other benefits disbursed under the grant.  **If “Yes” is selected in any of the questions above, please provide details in below text box.**   |  | | --- | |  |   **The applicant hereby acknowledges and consents to the above.\***  **Please be reminded to attach Part 6 (Excel), all supporting documents (refer to Page 3) together with this original application form in your submisssion to IMDA via the FormSG link.**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature of**  **A Director named in ACRA Biz Profile /**  **A member of the Senior Management\***  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Name (in BLOCK LETTERS)\***  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Designation\***  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date\***  **Note: Please delete and indicate accordingly.** | | |

**PART 8: ANNEX A (ADDITIONAL INFORMATION)**

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| **Proposal** | | | |
| **Target Segment** You may select more than one, if applicable. | | | **Number of Beneficiaries** Total number should tally with the total number of beneficiaries stated under Project KPIs (excluding tracking indicators). |
| **Children** (below 13 years) | |  |  |
| **Youths** (13-25 years) | |  |  |
| **Adults** (26-59 years) | |  |  |
| **Seniors** (60 years and above) | |  |  |
| **Persons with disabilities** (state the age range) | |  |  |
| **Others**  Please specify: | |  |  |
| **Risks Identification and Mitigation for proposed project** Identify potential risks and challenges to project delivery, along with corresponding mitigation strategies. | | | |
| **S/N** | **Foreseeable Risks and Challenges** | | **Mitigation Plans** |
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| **Long-Term Plans**  Outline strategies for ensuring project sustainability and scalability beyond the funding period. Explain how your organization will maintain continue the project after the initial two-year funding period ends. | | | |
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| **Collaborations** Describe any partnerships or collaborations integral to your project. | | | |
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| **List of partners and their specific roles or contributions**  Indicate the status of engagement with your partners: a) Partners you plan to contact, b) Partners you have already contacted, and c) Partners who have confirmed their involvement in the project. Add more rows if required. | | | |
| **S/N** | **Name of Partner(s)** | **Involvement in Project** | **Status** |
|  |  |  | Planning/ Contacted / Confirmed |
|  |  |  | Planning/ Contacted / Confirmed |
|  |  |  | Planning/ Contacted / Confirmed |
|  |  |  | Planning/ Contacted / Confirmed |
|  |  |  | Planning/ Contacted / Confirmed |

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| --- | --- | --- | --- |
| **Applicant’s Track Record and Project Team** | | | |
| **Individual/ Organisation’s Experience**  Highlight relevant individual/ organizational experience, providing recent examples of similar work or projects. | | | |
|  | | | |
| **Project Team’s Experience** List key team members, their roles in the project, and relevant experience. | | | |
| **S/N** | **Name** | **Role in Project** | **Relevant Experience** |
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1. *Company includes Associations, Societies and/or Charities.* [↑](#footnote-ref-2)