

## Training Industry Professionals in Tourism Project Executive Summary

---

Project Title:

---

### Applicant Information

Company Name:

Unique Entity Number (UEN):

Travel Agent (TA) Licence No. (if applicable):

Company Address:

Contact person:

Nature of Business:

**Project Description** | Please provide an overview of the project, using one of the headings below.

**1. Employee Upgrading** | Please indicate the scope of training and projected number of trainees

Core Training Areas (Select one or more):

- Foundational skills for service delivery
- Deep skilling in existing skills or upskilling in new/emerging skills
- Enhanced service delivery training

Main Skill Categories (Select one or more):

- Foundational Skills - Guest interaction, housekeeping, tourism ecosystem understanding
- Premium/Value-added Service - Concierge services, customised customer experiences
- Emerging and Specialised Skills - Culinary expertise, event management, storytelling, sustainability, digital capabilities
- Cross-Cultural Learning - Foreign languages, cultural immersion programmes

Number of trainees: \_\_\_\_\_

## 2. Leadership Development | Please indicate the type of leadership development programme and number of trainees below.)

### Programme type (Select one or more):

- External Programmes: Board-approved tourism training from institutions, including Masters degrees, specialised courses, conferences, and seminars.
- In-house Programmes: Local or overseas leadership development covering technical tourism skills, stretch assignments, and exchange programmes (excludes management associate programmes and study trips).

Number of trainees: \_\_\_\_\_

## Project Schedule | Please provide a broad timeline of the project.

Date of commencement:

Date of completion:

Duration (months):

Short Description of different phases:

## Declaration

I, on behalf of the proposing organisation, declare that the information furnished in this application is true and correct and I undertake the responsibility to timely inform the Singapore Tourism Board of any changes to the information provided in this application.

I declare and confirm (i) the genuineness of the authorised signatures within this document, and (ii) the completeness and conformity to original documents of all copies submitted to STB and the authenticity of the originals of such copies.

---

Signature

Name:

Designation:

Telephone:

Email:

Date of Submission: