



Annex A

CAREGIVERS TRAINING GRANT (FOR CAREGIVERS OF PERSONS WITH DISABILITY/SENIORS)

TERMS AND CONDITIONS

Centre for Enabled Living (CEL) accepts no responsibility whatsoever for the applicants' or the applicants' representatives' performance or non-performance of any of their respective duties or obligations, as a result of either their attendance at the course; or by reason of any negligence on the part of the training providers at the course. CEL shall not be liable for any loss or damage arising to the applicants, the applicants' representatives or any other third parties arising out of any act, representation or omission whatsoever.

All such courses are the sole responsibility of the training providers concerned and are conducted entirely independently of verification and/or supervision by CEL. Applicants purchasing, relying on or using such training materials do so entirely at their own expense and risk, and without any warranty whatsoever from CEL.

CEL and Panel Members of Caregivers Training Grant (CTG) do not endorse the accuracy or reliability of any advice, opinion, statement of course, course contents, curriculum, or any other information provided by the training providers. Reliance upon any such opinion, advice, statement of course, course contents, curriculum or any other information shall also be at your own risk.

I declare that I understand and agree with the above terms and conditions; I also confirm that the particulars and accompanying information stated below is true and that I have disclosed all necessary information relevant to the application.

Name and Signature of Applicant/Caregiver

Date

****For Training Provider's attention:**

Pls return this copy to CEL together with the Annex B (summary of the participants). Thank you!



APPLICATION FORM

SECTION A: TO BE FILLED IN BY APPLICANT

I PARTICULARS OF APPLICANT (CAREGIVER)

Name: _____

Citizenship: _____ Passport /NRIC No /Birth Cert. No.: _____

Date of Birth: _____ Age: _____ Sex: M/F Contact No(s): _____

Address: _____

_____ Postal Code _____

II PARTICULARS OF PERSON WITH DISABILITY (PWD) / SENIOR

Name: _____

Passport /NRIC No /Birth Cert. No.: _____ Age: _____ Sex: M/F

Contact No(s): _____ Relationship with Applicant (Caregiver): _____

Address (if different from applicant's): _____

_____ Postal Code _____

Type of Disability:

- | | |
|--------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Autism | <input type="checkbox"/> Hearing Impairment |
| <input type="checkbox"/> Intellectual Disability | <input type="checkbox"/> Visual Impairment |
| <input type="checkbox"/> Physical Disability | <input type="checkbox"/> Others (Pls specify : _____) |
| <input type="checkbox"/> Multiple Disability | |

Is the PWD a member or receiving service from any VWO?

- Yes (Please complete Section B)
- No (Please submit a copy of the doctor's certification stating the nature of disability)



III DETAILS OF TRAINING COURSE

1. Name of Training Provider: _____
2. Name of Training Course/Programme: _____
3. Reference No.: _____
4. Date of Training: From _____ to _____
5. Course Fees (*incl. GST*): _____

SECTION B: VERIFICATION BY VWO (FOR PWD ONLY)

This is to certify that _____ NRIC No. _____
is a member of /receiving service/attending programme at _____

(Name of VWO).

Verified by:

Name, Designation & Signature of VWO
Representative

Organisation Stamp

Date

For Training Provider Use:

Approved Not Approved Amount of Subsidy Approved: \$_____

Please refer to the attachment for more information



Centre for
Enabled Living

Annex A

Caregivers Training Grant (For Caregivers of Persons with Disability or Seniors)

Information for the Applicant (Caregiver)

This is a grant to support caregivers of persons with disability or seniors in attending training, seminars and workshops related to caregiving in order to equip them with relevant knowledge and skills and help them better cope with the challenges of caregiving.

Eligibility

To be eligible for the Caregivers Training Grant (CTG), the applicant must:

- i. Be a caregiver of a PWD¹ or Senior² (age 65 years and above), who is a Singapore Citizen or Permanent Resident
- ii. Be a family member or domestic helper of the PWD or Senior.
- iii. Attend a training course/courses pre-approved for the purpose of this Training Grant³
- iv. Complete the training course and receive the Certificate of Attendance

Mode and Quantum of Grant

1. Each PWD or senior can have more than one caregivers and the CTG subsidy amount is capped at \$200 per year per PWD.
2. If more than one caregivers of the same PWD or Senior attends the same training, only one caregiver will receive the CTG subsidy.
3. The CTG subsidy amount of \$200 has to be utilised within the financial year (Apr –Mar).
4. CEL will reimburse the approved CTG subsidy amount to the Training Provider.

Application Procedure (for caregivers)

1. Complete the application form that is available from:
 - a. Centre for Enabled Living at <http://www.cel.sg>
 - b. AWWA Centre for Caregivers Website at <http://www.awwa.org.sg>
 - c. Any of the training provider on the pre-approved list
2. Submit the application form to the training provider **at least 2 weeks** prior to the commencement of the training.
3. The training provider will inform the applicant the CTG subsidy amount once the application is approved.

¹ The applicant must show that the PWD is receiving service from/affiliated to a VWO or produce a doctor's certification indicating the disability of the dependent.

² The applicant must submit a copy of the senior's identity card as a proof of his/her age.

³ The list of pre-approved courses can be found on the Centre for Enabled Living at <http://www.cel.sg/> or the AWWA Centre for Caregivers Website (<http://www.awwa.org.sg>)