



Work Pass Division
18 Havelock Road
Singapore 059764
www.mom.gov.sg



EntrePass Application Form (Form 8)

This form may take 30 minutes.

Submit the application form by completing the steps in this order:

Step 1 Submit the following at any [SingPost branch](#):

- Original signed application form
- Copy of the supporting documents listed below
- Copy of the front and back of your NRIC, work pass card or travel document

Step 2 Produce your original NRIC, work pass card or travel document at the SingPost counter for verification.

Step 3 Pay the fee of \$105 for each application using cash, CashCard or NETS. Application fees are non-refundable.

Step 4 Keep the payment advice slip from SingPost as proof of your submission.

Supporting documents

Prepare 1 CLEAR COPY of the following supporting documents*:

(*Non-English documents must be accompanied by an English translation. The translation can be done by a translation service provider.)

- Personal particulars page of the applicant's travel document. If there are any amendments to the particulars (e.g. name or expiry date), please include the pages confirming them.
- Past employment testimonials in English (if available) or resume to elaborate on professional experiences, awards or recognitions (if any)
- (If the company has been registered with ACRA) Company's latest business profile or instant information from Bizfile
- Documents to support the innovative criterion/criteria that have been met

Business plan in English and not more than 10 pages. The business plan may include more information to support the innovative criterion/criteria that have been met. It should include the following:

Business idea

- Product and service offered
 - Market analysis
 - Operation Plan
 - Profile of management team
 - Supporting documents – e.g. licensing agreements, product certificates and endorsement patents
- All relevant documents that support the fulfilment of the eligibility criteria in your application

FORM 8 APPLICATION FOR AN ENTREPASS

INSTRUCTIONS

1. For *, please tick (✓) where appropriate.
2. Indicate 'Not applicable' or 'N.A' where necessary. Do not leave any fields blank.
3. It takes around 8 weeks to process the application. Visit www.mom.gov.sg/pass-application-status to check the application status.

PART 1 – ELIGIBILITY CRITERIA CHECKLIST

Please tick and complete all the parts under the **Basic Eligibility Criteria** and **Innovative Criteria** that you have met.

Basic Eligibility Criteria

Please indicate if you have met the basic eligibility criteria below:

- Registered (or intend to register) a private limited company with the Accounting and Corporate Regulatory Authority (ACRA) that is less than 6 months old on the date of this application.
- Holding or intend to hold 30% shareholding of the company you have registered within the first year of issue of the EntrePass

Innovative Criteria

Please indicate if you have met **any** of the following eligibility criteria for application as an **entrepreneur, innovator or investor**. Please also provide the details below and submit the relevant supporting documents.

Entrepreneur

- Has funding/investment from a recognised third-party venture capitalist (VC) or business angel that is recognised by a Singapore Government Agency

Name of investor(s):

Investment amount: **(S\$)**

Date of investment:

- Is an incubatee at a Singapore Government-recognised incubator

Name of incubator:

Is this an SGInnovate-linked incubation or acceleration programme? Yes / No

Duration of incubation:
(Please specify period)

Name of incubator manager:

Incubator manager's contact details:

- Has business network and entrepreneurial track record

Are you a participant in IMDA programmes? Yes / No

Programme name and duration (if relevant):

Have you founded and sold a tech company? Yes / No

Details:

Have you raised significant funding from investors for a current or past venture? Yes / No

Details:

Have you been incubated by an internationally renowned incubator or accelerator? Yes / No

Details:

Do you have strong industry networks and business contacts that are related to your proposed business? Yes / No

Details:

Have you received recognition by a national body, recognised media publication or credible industry organisation for your professional, business or entrepreneurial achievements and track record? Yes / No

Details:

Innovator

Holds an Intellectual Property (IP) that is registered with an approved national IP institution

Country where IP is filed:

Name of institution where IP is registered:

Name of inventor(s):

Title of IP:

Filing Status:

Filed, pending approval

Application Number:

Application Date:

Approved

Publication Number:

Publication Date:

Has ongoing research collaboration with a research institution recognised by Agency for Science, Technology and Research (A*STAR) or Institutes of Higher Learning in Singapore

Name of research institute:

Duration of collaboration partner:
(Please specify period)

Name of collaboration partner:

Collaboration partner's contact details:

Details of research collaboration:

Has extraordinary achievements in key areas of expertise

Technical / Domain expertise:

Is your area of expertise related to your proposed business? Yes / No

Details:

Do you have outstanding achievements or international recognition in your area of technical / domain expertise? Yes / No

Details:

Investor

Has investment track record

Are you willing to invest a substantial amount of money in a local company? Yes / No

Details:

Do you have a track record in investing in and driving the growth of highly-scalable businesses? Yes / No

Details:

Do you have substantial experience as a senior management professional or executive in a large corporation? Yes / No

Details:

Explain how your experience would be able to help drive growth in the registered company

Details:

PART 2 – PARTICULARS OF APPLICANT**Please indicate the FIN if the applicant has ever:**

- Applied for or worked in Singapore on an Employment Pass, S Pass or Work Permit.
- Studied in Singapore on a Student's Pass.
- Stayed in Singapore on a Dependant's Pass or Long Term Visit Pass.

Foreign Identification Number (FIN)

2A: Personal Particulars

Name (as on travel document, excluding salutations e.g. Mr, Miss, Professor, Doctor)

Alias (only if it appears on the travel document)

Sex* Female Male

Marital Status*

 Divorced Married Separated Single Widowed

Date of Birth (DD/MM/YYYY)

Nationality

Country/Region of Birth

State/Province of Birth

Country/Region of Origin (where the person obtained his/her first citizenship by birth or parentage)

State/Province of Origin

Race* Caucasian Chinese Indian Malay OthersReligion* Buddhist Christian Free Thinker Hindu Muslim
 Sikh Taoist Others**For Malaysian only**

Malaysian Old Identity Card Number

Malaysian Old Identity Card Colour*

 Blue Pink

Malaysian New Identity Card Number

Malaysian New Identity Card Colour*

 Blue Pink**For Bangladeshi and Chinese national only**

Foreign Identity Card Number

2B: Contact details

Email Address (You must provide this for us to contact you about the application.)

Singapore Phone Number (+65)

2C: Travel Document Information

Travel Document Type*

- | | |
|---|---|
| <input type="checkbox"/> Hong Kong Special Admin Region | <input type="checkbox"/> International Cert of Identity |
| <input type="checkbox"/> International Passport | <input type="checkbox"/> Macau SAR Travel Permit |

Travel Document Number

Issue Date (DD/MM/YYYY)

Expiry Date (DD/MM/YYYY)

PART 3 – APPLICANT'S EDUCATIONAL AND MEMBERSHIP DETAILS

Fill in up to 2 qualifications that were awarded to the applicant exactly as shown on the educational certificate.

3A: Educational Details**(1) Educational Detail**

Name of Awarding Body/Institution/University

Country

State/Province

Attended Main Campus or Affiliating College? (only for India qualification)

Qualification (e.g. Diploma. For Honours degree, please state the class and division.)

Specialisation (e.g. Chemical Engineering)

Faculty (e.g. Engineering)

Period of Study (DD/MM/YYYY)

From:

To:

Mode of Study*

-
- Full-Time
-
- Part-Time
-
- Distance Learning

(2) Educational Detail

Name of Awarding Body/Institution/University

Country

State/Province

Attended Main Campus or Affiliating College? (only for India qualification)

Qualification (e.g. Diploma. For Honours degree, please state the class and division.)

Specialisation (e.g. Chemical Engineering)

Faculty (e.g. Engineering)

Period of Study (DD/MM/YYYY)

From:

To:

Mode of Study*

-
- Full-Time
-
- Part-Time
-
- Distance Learning

3B: Societies/Organisations Membership (for the past 5 years)**(1) Society/Organisation Membership**

Name of Society/Organisation

Position Held* Chairman Member President Secretary
 Treasurer Vice Chairman Vice President

Period (DD/MM/YYYY)

From:

To:

(2) Society/Organisation Membership

Name of Society/Organisation

Position Held* Chairman Member President Secretary
 Treasurer Vice Chairman Vice President

Period (DD/MM/YYYY)

From:

To:

PART 4 – PARTICULARS OF APPLICANT'S SPOUSE**Only complete Part 4 if the applicant's spouse is a Singapore Citizen, Singapore Permanent Resident, Employment Pass, S Pass or Work Permit holder.**

Spouse is*

 a Singapore Citizen a Singapore Permanent Resident an Employment / S Pass holder or Work Permit holder

Spouse's Name

Spouse's FIN/NRIC Number

Spouse Identification Type

Spouse's Date of Birth (DD/MM/YYYY)

 FIN NRIC**PART 5 – APPLICANT'S WORKING EXPERIENCE****Working Experience**

Total Period of Working Experience

Years:

Months:

Total Relevant Working Experience (Relevant to the occupation in part 6A)

Years:

Months:

Start with the most recent working experience

Period (dd/mm/yyyy)		Name of Company	Location of Company (State and Country)	Position Held	Nature of Duties
From	To				

Prior Business Ventures

Indicate in chronological order.

Only list the business ventures for which the applicant was a founder, partner or shareholder.

Name of Company					
Nature of Business					
Place of Incorporation			Unique Entity Number (UEN) (if available)		
Position Held			Period (DD/MM/YYYY)		
From:			To:		
Company's turnover for the past 3 years					
Year:	S\$:	Year:	S\$:	Year:	S\$:

Name of Company					
Nature of Business					
Place of Incorporation			Unique Entity Number (UEN) (if available)		
Position Held			Period (DD/MM/YYYY)		
From:			To:		
Company's turnover for the past 3 years					
Year:	S\$:	Year:	S\$:	Year:	S\$:

Name of Company		
Nature of Business		
Place of Incorporation	Unique Entity Number (UEN) (if available)	
Position Held	Period (DD/MM/YYYY) From: _____ To: _____	
Company's turnover for the past 3 years		
Year: _____ S\$:	Year: _____ S\$:	Year: _____ S\$:

PART 6 – DETAILS OF EMPLOYING COMPANY**6A: General Information**

Only complete Part 6A if the applicant has registered the company with ACRA.

Unique Entity Number (UEN)		
Registered Name of Employing Company/Society/Organisation		
Phone Number		
Correspondence Address		
Block/House Number	Street Name	
Unit Number	Building Name	Postal Code

Nature of Business		
Operating Address where business activities are conducted		
Block/House Number	Street Name	
Unit Number	Building Name	Postal Code

Occupation (you may refer to www.mom.gov.sg/standard-occupations)

The fixed monthly salary refers to the basic monthly salary plus fixed monthly allowances. It does not include payments which vary from month to month.

Fixed Monthly Salary = Basic Monthly Salary + Fixed Monthly Allowances
 E.g. S\$5,000 = S\$4,500 + S\$500

For more details on the fixed monthly salary, refer to www.mom.gov.sg/fixed-monthly-salary

<i>As specified in the employment contract:</i>				
Basic Monthly Salary (S\$)	+	Fixed Monthly Allowances (S\$)	=	Fixed Monthly Salary (S\$)

Projected Manpower over the next 3 years		
Year 1	Year 2	Year 3
Number of Employees	Number of Employees	Number of Employees
Projected Turnover over the next 3 years		
Year 1	Year 2	Year 3
S\$	S\$	S\$
Amount of capital required to start business operations (S\$)		
Proposed percentage of shareholding (%)		Proposed paid-up capital (S\$)
Sources of funding (e.g. self-funded or through venture capital funds), please specify		

6B: Proposed Business Sector		
Only complete Part 6B if the applicant has not registered the company with ACRA.		
Please tick (✓) only 1 box		
<input type="checkbox"/> Café/Restaurant	<input type="checkbox"/> Community & Personal Services	<input type="checkbox"/> Education/Training
<input type="checkbox"/> Financial Services	<input type="checkbox"/> Information Technology	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Retail	<input type="checkbox"/> Trading	<input type="checkbox"/> Others. Please specify:

PART 7 – OTHER INFORMATION**Has the applicant ever:**

(a) Been refused entry into or deported from any country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(b) Been convicted in a court of law in any country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(c) Been prohibited from entering Singapore?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(d) Entered Singapore using a passport issued by a different country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(e) Entered Singapore using a passport showing another name?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(f) Been a Singapore Citizen or Singapore Permanent Resident?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(g) Studied in Singapore?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(h) Worked in Singapore?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(i) Stayed long-term in Singapore (not as a tourist)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If the answer to any of the above questions is YES, please provide the details

PART 8 – DECLARATION BY APPLICANT

I certify that this application is made for the purpose as stated by me. The statements made by me in this application are to the best of my knowledge true. I undertake to be responsible for my own stay, maintenance and repatriation. I shall indemnify the Government of Singapore for any charges or expenses which may be incurred by the Government in respect of the repatriation of myself and my dependants. I also undertake to be responsible for the compliance by me of any quarantine and medical surveillance imposed on me under Regulation 8 (2A) of the Immigration Regulations.

1. I declare that I have not suffered and am not suffering from Acquired Immune Deficiency Syndrome (AIDS) or infected with Human Immunodeficiency Virus (HIV) or Tuberculosis. I acknowledge that during the period of validity of my EntrePass, if I am found to be suffering from AIDS or infected with HIV or Tuberculosis, the EntrePass issued to me will be cancelled and I will have to leave Singapore by the date specified by the Controller of Immigration.
2. I understand that the following are conditions of the EntrePass:
 - a. If I have incorporated a business, I am only to work in the occupation and for the business specified on my EntrePass card. Should there be a change in my duties or designation, I am required to inform the Work Pass Division of the Ministry of Manpower in writing. If I decide to work for an employer other than my incorporated business, I must apply for a new work pass;
 - b. If I have not yet incorporated a business, I am not to engage in any work not related to starting my business in Singapore;
 - c. I shall operate my business only at the operating address stipulated in this document;
 - d. If I am unable to provide the operating address in this document, I shall update the Controller of Work Passes (“Controller”) in writing on the operating address within 3 months after I have incorporated my business;
 - e. I shall inform the Controller of any changes in writing in the operating address within 7 days of such change;
 - f. I shall cancel my EntrePass within 7 days of cessation of my business;
 - g. I shall, for so long as my EntrePass is valid, inform the Controller of Work Passes of my residential address, in such form or manner as the Controller may determine, within 14 days after the commencement of my employment in Singapore after each change of my residential address, as the case may be;
 - h. If I fail to complete the incorporation of my business within 1 year from the issuance of my EntrePass and if I submit an application to renew my EntrePass, the Controller may refuse to renew my EntrePass.
3. I shall report in person to the Controller as and when I am required by the Controller to do so.
4. I acknowledge and accept all the above conditions. Further and in addition, I hereby declare that –
 - a. I confirm that the information as set out in this application for EntrePass is to the best of my knowledge, true and correct. All documents submitted in support of this application for EntrePass are true copies of the originals.
 - b. I understand that I may be prosecuted if I have provided any information which is false in any material particular or is misleading by reason of the omission of any material particular.
 - c. I have not, directly or indirectly, engaged or used the services of an unlicensed employment agency.
 - d. I give my consent to the Government of Singapore to obtain from and verify information with any person, organisation or any other source for assessing my application.
 - e. I hereby give my consent for the Comptroller of Income Tax to verify my income stated in my current and renewal applications, based on my assessment record for the current Year of Assessment, for the Controller of Work Passes. In the event my assessment record for the current Year of Assessment is not available or finalized at the point of verification, I understand the Comptroller of Income Tax will verify my income against my assessment record for the two previous Years of Assessment. I also hereby give my consent for the Comptroller of Income Tax to thereafter communicate the results of the verification to the Controller of Work Passes.
 - f. I understand that a SingPass will help me to access Government e-services in Singapore and I give my consent to the Ministry of Manpower to share my personal details with the SingPass issuing agency. This allows me to apply for a SingPass account at a later time if I am eligible for a SingPass.
 - g. I understand that if I breach any of the above conditions, I may be prosecuted and the Controller may revoke my EntrePass. Such breaches will be taken into account and they may affect my future work pass applications.

I declare that I have read and understood the above.

Applicant’s name (as on travel document)	Applicant’s signature
	Date (DD/MM/YYYY)

PART 9 – DECLARATION BY EMPLOYMENT AGENCY**Applicable if the services of an employment agency were used**

I declare that I have explained the contents of the application for an EntrePass and this Declaration Form to the applicant.

I declare that the information in this Application for an EntrePass, Declaration Form and any appeals are, to the best of my knowledge, true and correct; and that all documents submitted in support for this Application, Declaration Form and any appeals, are true copies of the originals.

Name of Employment Agency	Licence Number
	Unique Entity Number (UEN)
Name of Employment Agency Personnel	Signature of Employment Agency Personnel
Personnel Number	Date (DD/MM/YYYY)