



EntrePass Application Form (Form 8)

Important: Please open and complete this form using **Adobe Acrobat Reader DC**, as it may not appear correctly with other PDF readers.

This form may take 30 minutes.

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

- **Step 1** Download and fill in the application form in softcopy format so that you can get a payment reference number which you need to use for payment in **Step 3**.
- Step 2 Sign the application form.
- Step 3 Pay the application fee using internet banking. Application fees are non-refundable. See Page 13.
- **Step 4** Upload the completed application form and supporting documents.

Supporting documents

You will need the following documents* in PDF or JPG format for Step 4:

(*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 of 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
- o Operation Plan
- Profile of management team
- o Supporting documents e.g. licensing agreements, product certificates and endorsements
- ☐ All relevant documents that support the fulfilment of the eligibility criteria in your application

FORM 8 APPLICATION FOR AN ENTREPASS

Step 1 Fill in the form in softcopy format

INSTRUCTIONS

- 1. Enter 'Not applicable' or 'N.A' where necessary. Do not leave any fields blank.
- 2. 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 complete all the parts under the Basic Eligibility Criteria and Innovative Criteria that you have met.

Basic Eligibility Criteria

Please click on the checkbox 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.

Have set up (or intend to set up) a company that is venture-backed or possesses innovative technologies¹.

Holding or intend to hold 30% shareholding of the company you have registered within the first year of issue of the EntrePass

- (i) Raised funding from capital providers including government investment vehicle, venture capitalist, corporates, family offices, and business angels; or
- (ii) Developed, produced or commercialised tech products, services or platforms; or (ii) Patent(s) registered with an approved national IP institution; or
- (iii) Ongoing research collaboration with a research institution.

Innovative Criteria

Please click on the checkbox 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 upload 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:
Duration of incubation: (Please specify period)
Details:
Name of incubator manager:
Incubator manager's contact details:

¹ A company is venture-backed or possesses innovative technologies if it has:

	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?
	Details:
	Do you have outstanding achievements or international recognition in your area of technical / domain expertise?
	Details:
Investor	
	Has investment track record
	Are you willing to invest a substantial amount of money in a local company? Details:
	Details.
	Do you have a track record in investing in and driving the growth of highly-
	scalable businesses? Details:
	Betails.
	Do you have substantial experience as a senior management professional
	or executive in a large corporation? Details:
	Explain how your experience would be able to help drive growth in the registered company. Do outline
	your plans (i.e. investment quantum, period and pipeline) to invest in other local innovative or tech
	startups.
	Details:

Form 8 – EntrePass Application Form				
PART 2 – PARTICULARS OF APPLICANT				
Please enter the FIN if the applicant has ever: Applied for or worked in Singapore on an Employmen Studied in Singapore on a Student's Pass. Stayed in Singapore on a Dependant's Pass or Long				
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	Marital Status			
Date of Birth (DD/MM/YYYY)	Nationality/Citizenship			
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	Religion			
2B: Travel Document Information				
Travel Document Type				

2C: Contact details		
Email Address (You must provide this	for us to contact you about the application.)	Singapore Phone Number
		(+65)

Expiry Date (DD/MM/YYYY)

Travel Document Number | Issue 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					
Country	State/Flovilice					
Attended Main Campus or Affiliating College? (only f	or India qualification)					
Qualification (e.g. Diploma. For Honours degree, ple	ase state the class and division.)					
Quamicanici (e.g. 2.p.e.mar : e. r.e.ieare aeg.ee, p.e						
Specialisation (e.g. Chemical Engineering)	Faculty (e.g. Engineering)					
Period of Study (DD/MM/YYYY)	Mode of Study					
From: To:	·					
(2) Educational Detail						
Name of Awarding Body/Institution/University						
Name of Awarding Body/institution/onliversity						
Country	State/Province					
Attended Main Campus or Affiliating College? (only f	or India qualification)					
Qualification (e.g. Diploma. For Honours degree, ple	and state the class and division \					
Qualification (e.g. Diploma. For Horiours degree, ple	ase state the class and division.					
Specialisation (e.g. Chemical Engineering)	Faculty (e.g. Engineering)					
Period of Study (DD/MM/YYYY)	Mode of Study					
From: To:	•					
10.						
3B: Societies/Organisations Membership (for the page 1)	ast 5 years)					
(1) Society/Organisation Membership						
Name of Society/Organisation						
Position Held	Period (DD/MM/YYYY)					
	From: To:					
	FIOIII. 10.					
(2) Society/Organisation Membership						
Name of Society/Organisation						
Position Held	Period (DD/MM/YYYY)					
	From: To:					
1	1					

Form 8 – EntrePass Application Form									
PART 4 – F	PARTICULA	RS OF APPLI	CANT'S	SPOUSE					
Only complete Pass or Work	te Part 4 if the Permit holder	applicant's spoi r.	use is a Sir	ngapore C	itizen, Singap	ore Per	manent Re	sident, Employment Pas	is, S
Spouse is									
Spouse's N	ame								
Spouse's FI	N/NRIC Num	ber	Spouse	Identifica	tion Type		Spouse's	s Date of Birth (DD/MM/Y	YYY)
PART 5 – <i>F</i>	APPLICANT'	'S WORKING	EXPERIE	ENCE					
Working E									
	d of Working	Experience							
Years:					Months:				
Total Relev	ant Working	Experience (R	Relevant to t	he occupa	tion in Part 6A)			
Years:				·	Months:	•			
Start with the	most recent w	vorking experier	nce						
Per		vorking experier	100	Loc	ation of				
(DD/MN		Name of Co	mpany		ny (Country	Posit	ion Held	Nature of Dutie	s
From	To				l State)				

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 Nu	mber (UEN) (if ava	illable)	
Position Held		Period (DD/MM/YY	TYY)		
Company's turnover for the past 3	vears	1 101111			
Year: S\$:	Year:	S\$:	Year:	S\$:	
Name of Company					
Nature of Business					
Place of Incorporation		Unique Entity Nu	mber (UEN) (if ava	ilable)	
Position Held		Period (DD/MM/YY	YY)		
		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 Nu	mber (UEN) (if ava	ilable)	
Position Held		Period (DD/MM/YYYY)			
		From:	To:		
Company's turnover for the past 3					
Year: S\$:	Year:	S\$:	Year:	S\$:	

PART 6 – DETAILS OF EMPLOYING COMPANY

6A: General Information

Only complete Part 6A if the	applicant has re	gistered the com	pany with ACRA.
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Unique Entity Number (I	JEN)				
Registered Name of Em	ploying Co	ompany/Society/Or	ganisation		
Phone Number					
Correspondence Address					
Block/House Number	Street Na	ime			
Unit Number	Building N	Name			Postal Code
Nature of Business					
Operating Address where	business ac	ctivities are conducte	ed		
Block/House Number	Street Na	ime			
Unit Number	Building N	Name			Postal Code
Occupation (you may re	fer to the <u>l</u>	ist of standard occ	upations)		
The fixed monthly salary re which vary from month to n		asic monthly salary p	olus fixed monthly	allowa	nces. It does not include payments
Fixed Monthly Salary = Bas E.g. S\$5,000 =	ic Monthly Sa S\$4,500	alary + Fixed Monthly <i>F</i> + SS	Allowances \$500		
For more details on the fixed	monthly sala	ry, refer to this page.			
As specified in the employme	nt contract:				
Basic Monthly Salary (S\$)	+	Fixed Monthly All	owances (S\$)	= F	ixed Monthly Salary (S\$)
Projected Manpower ov	er the next	: 3 years			
Year 1		Year 2		Yea	r 3
Number of Employees					
Projected Turnover over Year 1	Projected Turnover over the next 3 years				
		Year 2 Year 3			
S\$	S\$ S\$ Uired to start business operations (S\$)				
		·	,		
Proposed percentage of	sharehold	ling (%)	Proposed paid-	up ca	apital (S\$)
Sources of funding (e.g.	self-funded o	r through venture capi	tal funds), please s	specif	у

6B: Proposed Business Sector

Only complete Part 6B if the applicant has not registered the company with ACRA.

PART 7 – OTHER INFORMATION	
Has the applicant ever:	
(a) Been refused entry into or deported from any country?	
(b) Been convicted in a court of law in any country?	
(c) Been prohibited from entering Singapore?	
(d) Entered Singapore using a passport issued by a different country?	
(e) Entered Singapore using a passport showing another name?	
(f) Been a Singapore Citizen or Singapore Permanent Resident?	
(g) Studied in Singapore?	
(h) Worked in Singapore?	
(i) Stayed long-term in Singapore (not as a tourist)?	
If the answer to any of the above questions is YES, please provide the details	

How will you be making payment for this application?

Please select your payment method

Step 2 Get the form signed by all parties

PART 8 - DECLARATION BY APPLICANT

- 1. 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.
- 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.
- 3. 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;
 - 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.
- 4. I shall report in person to the Controller as and when I am required by the Controller to do so.
- 5. 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 undertake not to misuse controlled drugs or to take part in any political or other activities during my stay in Singapore which would make me an undesirable or prohibited immigrant under the Immigration Act.
 - e. 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.
 - f. 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.
 - g. I consent for the Government of Singapore and its statutory authorities to display my information on the Ministry of Manpower's work pass systems, and to disclose such information to any relevant person or organisation for the administration of matters relating to work pass and passes for dependents.
 - I consent to the Ministry of Manpower displaying my pass details when my card is scanned using the Ministry of Manpower's work pass mobile application.
 - i. 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.
 - j. Should this application be approved, I will make an application to Ministry of Manpower to enter Singapore subject to prevailing entry requirements at the point of entry into Singapore.
 - k. 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.

I declare that in relation to my COVID-19 vaccination status, I will adhere to all vaccination requirements, as set out in: https://www.mom.gov.sg/vac-reqmts.

This is undertaken in accordance with the following where applicable – the prevailing guidelines of the Singapore Ministry of Health and Ministry of Manpower, or the Employment of Foreign Manpower (Work Passes) Regulations 2012.

To meet the requirements above, I declare that I have read the guidelines contained in https://www.mom.gov.sg/vac-reqmts.

Applicant's name (generated from Part 2A)	Applicant's signature	
	Date (DD/MM/YYYY)	

PART 9 - DECLARATION BY EMPLOYMENT AGENCY

Only 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.

I declare that I have informed the employer of this applicant, that in relation to the COVID-19 vaccination of the applicant, the employer will inform and ensure that the applicant adheres to all vaccination requirements, as set out in: https://www.mom.gov.sg/vac-reqmts.

This is undertaken in accordance with the following where applicable - the prevailing guidelines of the Singapore Ministry of Health and Ministry of Manpower, or the Employment of Foreign Manpower (Work Passes) Regulations 2012.

To meet the requirements above, I declare that I have read the guidelines contained in https://www.mom.gov.sg/vac-reqmts.

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)

Step 3 Pay the application fee using internet banking
Pay the fee of \$105 for each application using the method you chose on Page 10:

Step 4 Upload the completed application form and supporting documents

Upload the following documents at www.mom.gov.sg/submit-entrepass (if you have a

Singpass) or www.mom.gov.sg/submit-entrepass-no-login (if you do not have a Singpass):

- Original signed application form (as a PDF file)
- Screenshot of banking page and applicant's travel document (as 1 PDF or JPG file, cannot exceed 1 MB
- Remaining supporting documents listed on Page 1 (as 1 PDF file, cannot exceed 3 MB)