

Maritime and Aviation Training Fund

Maritime Services Traineeship Scheme – Marine Insurance

Application Form (*Note 1*)

Section A Particulars of Applicant

Name of Insurance Company/Broker Firm

("the Applicant") (*Notes 2 & 3*) : _____

Business Registration No./

Other Business Proof (please specify) No. : _____

Insurance Authority Registration No. : _____

Scope of Insurance Practice (please tick all boxes that are applicable) :

Cargo insurance (protection on shipments from physical damage or theft)

Marine hull insurance (*protection on the insured vessel or fleet against physical damage caused by a peril of the sea or other covered perils while the vessel is in transit over water*)

Marine Protection & Indemnity and/or marine related liability (*liability risks for clients with exposures in the direct or indirect marine operations*)

Others (*please specify*) : _____

Correspondence Address : _____

Telephone No. : _____ Fax No. : _____

E-mail Address : _____ Website : _____

Contact Person (*Note 5*)

Full Name : _____ Position : _____

Telephone No. : _____ E-mail Address : _____

Section B Mode of Training

Only **ONE quota** will be granted to the applicant, if approved, at any one time for either one of the training modes as follows (*please tick in the appropriate box*):

- ☐ (A): Rotational Training for Multiple Trainees¹
- ☐ (B): Dedicated Training for an Individual Trainee²

Section C Particulars of Training Programme

1. Please provide an overview of the training programme (*with the estimated percentage of training time allocated, with in-house training constituting not less than 70% of the total training time*), covering the framework, structure, major features, monitoring mechanism, maintaining training record, standard of completion and expected level of attainment.

2. Please indicate external training of no more than 30% of the whole training programme per year in maritime-related aspects covered by the programme:

Title of Course/Activity	Organiser/Trainer	Duration and Frequency

3. Please enclose detailed training programme with sufficient information on:
- (a) the structure, methodology, approach and quality in delivering the programme, such as coverage of training fields, progression schedule and quality assurance mechanism;
 - (b) the relevancy, usefulness, quality and attainment level of each training course, service or activity with respect to marine insurance professions;
 - (c) the background, experience and professional or academic standing of the personnel, institutions or bodies offering the training; and
 - (d) the evaluation, audit and review mechanisms of the training programme.

¹ For applicant who provides training to **a group of trainees recruited and trained under a rotational training programme across different departments including the marine insurance department** in accordance with the applicant's policy, only trainees with approved training plans and programmes in the marine insurance department will be eligible for sponsorship.

² For applicant who provides training to **a single individual** who aspires to pursue his/her career in the marine insurance, only the approved training programmes covering marine insurance will be eligible for sponsorship.

4. Please indicate basic skills in which the trainee(s) will be trained under the programme (*please tick in appropriate boxes*) :

- | | | |
|--|--|---|
| ☐ Communication/ Customer service | ☐ Numeracy | ☐ Organisation |
| ☐ Research and analytical skills | ☐ Problem solving | ☐ Presentation skill |
| ☐ Others (please specify) | | |

5. Please select at least three of the following insurance practice areas in which the trainee(s) will be trained under the programme (*please tick in appropriate boxes*) :

- | | |
|--|--|
| ☐ Risk management/assessment | ☐ Claims management |
| ☐ Compliance including sanction | ☐ Policy operation services |
| ☐ Underwriting & pricing model | ☐ Technical learning - clauses & wordings |
| ☐ Attend marketing & networking activities with mentors | |
| ☐ Attend industry-wide events, functions & seminars | |
| ☐ Others (please specify) | |

6. Please indicate the scope of insurance practice in which the trainee(s) will be trained under the programme (please tick in appropriate boxes) :

Cargo insurance (*protection on shipments from physical damage or theft*)

Marine hull insurance (*protection on the insured vessel or fleet against physical damage caused by a peril of the sea or other covered perils while the vessel is in transit over water*)

Marine Protection & Indemnity and/or marine related liability (*liability risks for clients with exposures in the direct or indirect marine operations*)

Others (*please specify*) : _____

7. Particulars of Trainee(s) (*please attach additional sheets if insufficient space below*) (Note 6):

(1) Trainee No. 1

Name : _____ Age : _____

Hong Kong Identity Card No. : _____ Academic Qualifications : _____

Professional Qualifications (if any) : _____

Name of Trainer : _____ Date of commencement of training : _____

Year(s) of full-time working experience in an insurance company/broker firm³: _____

(2) Trainee No. 2

Name : _____ Age : _____

Hong Kong Identity Card No. : _____ Academic Qualifications : _____

³ A person who joins an insurance company or an insurance broker firm as a trainee, or a person with less than two years of full-time working experience in an insurance company or an insurance broker firm, and is recruited to be trained in marine insurance field is considered eligible as a trainee for the purpose of Maritime Services Traineeship Scheme.

Professional Qualifications (if any) : _____

Name of Trainer : _____ Date of commencement of training : _____

Year(s) of full-time working experience in an insurance company/broker firm⁴: _____

Section D Signature, Declaration and Consent

I, the undersigned, am the authorised person (*Note 7*) of the Applicant, hereby confirm and declare that:

1. I have read and understood the terms and conditions, and agreed with all the obligations and responsibilities, as set out in the Notes for Applicant in this application form and the “Guidance Notes for Application”;
2. the Applicant accepts that Members of the Working Group on Maritime Services Traineeship Scheme or staff of the Secretariat of the Maritime and Aviation Training Fund (“the Secretariat”) may conduct reasonable inspections or checking, either by appointment or without prior notice, before and after approval of this application;
3. the Applicant consents to have the information provided in connection with this application disclosed, without further reference to the Applicant, to Government policy bureaux/departments, statutory bodies or third parties for the purposes of processing the application, conducting research and survey, compiling statistics, meeting requirements of the law and/or performing their functions and disbursing funding and/or related purposes;
4. the Applicant authorises the Secretariat and the HKSAR Government to handle information provided in relation to this application, including and not limited to the disclosure of the information to other parties, in accordance with the “Guidance Notes for Application” and whenever the HKSAR Government considers appropriate;
5. the Applicant will inform the Secretariat of any change in the training programme submitted in this application in reasonable time, and understands that application for disbursement for trainee(s) whose training programme without prior endorsement by the Working Group on Maritime Services Traineeship Scheme will not be considered;
6. I have read, understood, and undertake to comply with the following clauses:
 - (i) the Government reserves the right to disqualify this application on the grounds that the Applicant has engaged, is engaging, or is reasonably believed to have engaged or be engaging in acts or activities that are likely to cause or constitute the occurrence of offences endangering national security or otherwise the exclusion of the Applicant from future applications is necessary in the interest of national security, or is necessary to protect the public interest of Hong Kong, public morals, public order or public safety;
 - (ii) even after the application is approved, the Government may immediately withdraw or cancel the relevant approval upon the occurrence of any of the following events:
 - the Applicant has engaged or is engaging in acts or activities that are likely to constitute or cause the occurrence of offences endangering national security or which would otherwise be contrary to the interest of national security;
 - the continued disbursement to the Applicant is contrary to the interest of national security; or

⁴ See footnote 3 above.

- the Government reasonably believes that any of the events mentioned above is about to occur; and
7. the information provided in this application, including on the application form and supporting documents enclosed, is true and accurate and complete. I understand that if any information provided in connection with this application is inaccurate or misleading, the application will be rejected forthwith and the HKSAR Government reserves all rights to take further action it deems appropriate.

Signed by the authorised person, being a director, the company secretary and/or such other authorised persons of the Applicant:

Signature of Authorised Person : _____

Full Name : _____

Position : _____

Telephone No. : _____

E-mail Address : _____

Date : _____

Official Organisation Stamp

Notes for Applicant

- (1) Please study the “Guidance Notes for Application” carefully before making the application.
- (2) Please state the name of the insurance company or broker firm applicant as that registered in Hong Kong under the Business Registration Ordinance (Cap. 310) and under the Insurance Authority. Other registration will be subject to assessment and acceptance by the Working Group on Maritime Services Traineeship Scheme.
- (3) Disbursement will be made by way of cheque payable to the Applicant in the English name as stated in the application. Please therefore ensure that the name is correctly stated and can handle cheque payment. The Applicant will have to bear the administrative cost (if any) for any returned cheque due to error on the part of the Applicant.
- (4) Disbursement will be made subject to production of satisfactory proof of payment of salary to the trainee(s) and progress reports.
- (5) Please appoint a person who will be the point of contact on behalf of the Applicant with the Secretariat in relation to this application.
- (6) Nominated trainee(s) must be directly employed by the insurance company or broker firm applicant.
- (7) The application must be signed by an authorised person, being a director, the company secretary and/or such other authorised persons acting for and on behalf of the Applicant who is accountable for providing the information in connection with this application.
- (8) The completed Application Form, together with (i) a copy of documentary proof on the name or business of the Applicant and (ii) a detailed training programme, should be submitted to the Secretariat **by hand or by post**. The address of the Secretariat is –

Secretariat of Maritime and Aviation Training Fund
(Attn: Maritime Services Traineeship Scheme – Marine Insurance)
Transport and Logistics Bureau
20/F., East Wing, Central Government Offices
2 Tim Mei Avenue, Hong Kong

Submission by email or fax will **NOT** be processed. All documents (including application form and supporting materials) submitted for the application will **NOT** be returned.

Personal Data Collection

The personal data collected in this application form and the attachment(s) (the “data”) will be used by the Working Group on Maritime Services Traineeship Scheme or the HKSAR Government for processing the application and other related purposes. The data may also be provided to other Government policy bureaux/departments, statutory bodies or third parties for the purposes of processing the application, conducting research and survey, compiling statistics, meeting requirements of the law and/or performing their functions and disbursing funding or related purposes. Failure to provide sufficient data may lead to deferment of approval or rejection of application.

By submitting this application, the Applicant confirms and undertakes that the Applicant consents to provide his/her personal information, and has obtained the consent of all the trainee(s) and trainer(s) in providing their personal information in this application for the purpose.

The Applicant has the right to request access to and correction of the data. Any such request should be made in writing to –

Secretariat of Maritime and Aviation Training Fund
Transport and Logistics Bureau
20/F., East Wing, Central Government Offices
2 Tim Mei Avenue, Hong Kong

For enquiries, please email to matf@tlb.gov.hk.