PEMBANGUNAN SUMBER MANUSIA BERHAD

MANUAL PROPOSAL SUBMISSION GUIDELINES

Strategic Initiatives
(DAYA / GTB / BORNEO / DIGITAL / NUSA)

SECTION 1: HOW TO USE THE TEMPLATE?

1. This guideline shall be read together with the HRD Corp Manual Submission Proposal template.
2. Training Providers are required to prepare their proposals using the format prescribed in the HRD Corp Manual Submission Proposal template.
3. All relevant sections of the template shall be completed accordingly.
4. The cover page, guideline page, format and overall structure of the template shall remain unchanged and shall not be altered, modified or replaced.
5. Any additional information, supporting documents, or other relevant materials not specifically requested in the template may be attached separately as appendices to the proposal.
6. **Each proposal** shall be submitted for **one (1) initiative only**.
7. Training Providers intending to participate in more than one initiative shall submit a separate proposal for each initiative.

SECTION 2: HOW TO SUBMIT?

1. **Submission Location:**
   - Wisma HRD Corp, Jalan Beringin, Bukit Damansara, 50490 Kuala Lumpur, Federal Territory of Kuala Lumpur

2. **Envelope Labelling Requirements:**
   - Proposals must be submitted in a sealed envelope and clearly labelled with the following information:
     - For Attention: Strategic Initiatives Unit
     - Initiative Name (DAYA / GTB / BORNEO / DIGITAL/NUSA)
     - Training Provider Name
     - Programme Title

3. **Submission Procedure**
   - **Proposals may be submitted during HRD Corp operating hours (Monday to Friday, 9.00 a.m. to 5.00 p.m., excluding public holidays).**
     i) Submit the proposal at the Front Desk Counter, Wisma HRD Corp.
     ii) Obtain an official time stamp from the HRD Corp representative at the front desk.
     iii) Scan the HRD PACE QR form provided at the front desk counter.
     Note: One (1) QR form registration *is applicable for* ***one (1) proposal only.***
     iv) Deposit the time-stamped proposal into the designated Proposal Submission Box located at the lobby.



PEMBANGUNAN SUMBER MANUSIA BERHAD

PROGRAMMES MANAGEMENT

STRATEGIC INITIATIVES

MANUAL SUBMISSION PROPOSAL

INITIATIVES:

☐ **DAYA** ☐ **DIGITAL** ☐ **NUSA**

☐ **GTB** ☐ **BORNEO**

Note: Please tick only one (1) initiative.

TRAINING PROVIDER NAME	
MYCOID	
COURSE TITLE	

PART 1: COURSE PROVIDER

1. **Training Provider Name** ……

2. **Training Provider (MYCOID)** ……

3. **Registration Date** ……

4. **Primary Contact Details**
   Name: ……
   Email Address: ……
   Mobile Number: ……

5. **Secondary Contact Details**
   Name: ……
   Email Address: ……
   Mobile Number: ……

6. **Location Information**
   Address: ……
   Postcode: ……
   State: ……

Please provide a Certified Copy of Latest SSM Company Registration Document.

I would like to declare and confirm that all information provided is true and accurate

…….. ……

Signature Company Official Stamp

Name: Date:
……..

Position:

PART 2: TRAINING DETAILS

1.	Training Title	Eg: Sewing programme, etc
2.	Training Methods	Face to Face / Classroom / Hybrid
3.	Training Type	Technical / non-technical
4.	Skill Areas	Eg: Manufacturing & Engineering
5.	Training State	Eg: Selangor, etc
6.	No of Participants (Proposed Trainees)	
7.	Course Duration Type	Short Term **or** Long Term
8.	Training Overview	Provide **comprehensive overview** of the programme which includes the following information: • Added value • How well is this programme recognized by the industry. Any reports/findings on the need of this programme.
9.	Training Content	Please provide a list of all training modules in the format prescribed in Appendix I.
10.	Level of Certification	Certification of Attendance **or** Professional Certification
11.	Training Duration	Please state the number of training days & hours (follow as per guideline)

APPENDIX I

PART 3: TRAINING MODULE

NO.	MODULE NAME	MODULE OBJECTIVES	MODULE HOUR
1.			
2.			
3.			
4.			
5.			
TOTAL HOURS			

PART 4: TRAINER

1.	Trainer's Category	Malaysian (TDMS) Internal **or** Non-Malaysian / External
2.	Trainer's Name	
3.	Identification Number	
4.	TTT Certification Number	
5.	No. of Experience	

PART 5: ATTACHMENT

1.	Certification Supporting Evidence	Appointment or collaboration letter from the awarding body
2.	Other Supporting Document	1. Training Provider Registration Certification 2. Master Service Agreement Document 3. Details Trainer Profile **(Attachment I)** 4. Trainer TTT Certification (Issued by HRD Corp) 5. Training Brochure

Attachment I

TRAINER'S PROFILE

1.0 GENERAL INFORMATION

1.1 NAME :

1.2 I/C or PASSPORT NO. :

2.0 TRAINER'S PROFILE

2.1 ACADEMIC QUALIFICATION :

2.2 PROFESSIONAL MEMBERSHIP :

2.3 INDUSTRIAL EXPERIENCE :

2.4 OTHER RELATED STRENGTH(s) :

3.0 **HRDF TTT CERTIFICATION** *(Please attach the copy of TTT Certificate)*

3.1 TTT CERTIFICATE NO. :

***Note: Kindly attach the complete resume of trainer**

PART 6 - SCHEDULE OF PRICES

No.	Item	Description	Fee Per Participant (RM)
1	**Course Fee**	Inclusive of trainer fees, training materials, meals and refreshments, training venue arrangement, equipment, and all other costs related to course delivery.	
2	**Professional Certification Fee**	If applicable	
3	**Examination Fee**	If applicable	
Subtotal (RM)			
SST (if applicable)			
Total Amount Per Participant (RM)			
Grand Total Amount (RM) *(Total Amount Per Participant × Number of Participants Requested)*			

Note: For SST charges, please provide your SST Registration Number or attach any other supporting document as proof of SST registration.