**Duke-NUS Medical School  
Khoo Bridge Funding Award (KBrFA) from**

**The Gift of the Estate of Tan Sri Khoo Teck Puat**

Duke-NUS Medical School (Duke-NUS) is pleased to announce a Call for Proposals for bridge funding awards made possible by the generous gift from the estate of Tan Sri Khoo Teck Puat.

**Khoo Bridge Funding Programme   
[ November 2020 Call for Applications]**

The Khoo Bridge Funding Awards are made to help investigators with appointments at Duke-NUS who have had a lapse in grant support.

**Eligibility:**

1. Applicants must hold regular rank or clinical faculty appointments with Duke-NUS at the Assistant Professor level or above.
2. Applicants must be a full-time (i.e. >50% FTE) staff member of Duke-NUS or a SingHealth Institution.
3. Applicants must have been unsuccessful with a recently submitted (i.e. submitted on or after 1 November 2019) major independent investigator award. *Please see notes below for the list of grants which are included1 and excluded2 as major independent investigator awards.*

**Proposal Review:** A Bridge Funding Committee will be appointed by the Dean to review the proposals. The primary criteria used to evaluate the applications are the merits of the proposals and the likelihood of the applicant securing external funding following bridge funding.

**Funding:** The Bridge Funding is up to S$125,000 for a period of 1 year. No extensions will be permitted. Investigators who have received a Khoo Bridge Funding Award within the past 2 years (i.e. awarded between 1 January 2019 to 31 December 2020) will receive a maximum of S$50,000 if selected.

**Reporting:** Awardees are required to submit a Final Report to Duke-NUS within 2 months after the project end date.

**Closing Date: 15 January 2021, 5.00pm  
Please submit all materials in a single PDF copy to: kbrfa@duke-nus.edu.sg**

**The applicant is to copy his / her ACP Chair / SRP Director in the email when submitting the PDF copy of the application.**

**The subject line of the email should read “Khoo Bridge Funding Award Proposal”.**

**Notes:**

**1 Major independent investigator awards include:** National Medical Research Council (NMRC) Individual Research Grant (IRG), Clinician Scientist Award (CSA), Singapore Translational Research (STaR) Investigator Award, Clinical Trial Grant (CTG), Health Services Research Grant (HSRG) and Ministry of Education (MOE) Tier II Grant.

**2 Major independent investigator awards exclude:** NMRC Transition Award (TA), New Investigator Grant (NIG), Young Individual Research Grant (YIRG), SingHealth Foundation Grants, institutional pilot grant awards,NMRC Large Collaborative Grant (LCG) Programme, MOE Tier III Programme, National Research Foundation (NRF) Competitive Research Programme (CRP) andNational Health Innovation Centre (NHIC) project grants.

1. **Title of Project** (Limit to 30 words)

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1. **EARLIEST Project START DATE (if awarded):**
2. **PRINCIPAL INVESTIGATOR (PI):**

*Please note that* ***only one*** *application per individual is allowed. Singapore citizens and permanent residents will have priority consideration for the awards.*

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| --- | --- |
| Name: |  |
| Designation: |  |
| Primary Institution / Department: |  |
| Name of ACP / SRP: |  |
| E-mail: |  |
| Contact No: |  |
| Nationality: |  |
| Singapore Permanent Resident: | Yes No |
|  |  |

1. **Abstract of the Proposal**

In no more than 300 words (Arial font size 10), please provide a succinct and accurate description of the proposal to include its specific aims, hypotheses, methodology and approach of the research proposal, including its importance to medical and / or biomedical science.

Click here to enter text.

1. **Details of Research Proposal**

Please attach a copy of the research proposal, including the budget, that was reviewed and for which the applicant is seeking bridge funding.

Click here to enter text.

Please list down all co-investigators and collaborators of the research proposal.

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| --- | --- | --- |
| **S/N** | **Names of Co-Investigators and Collaborators** | **Institution** |
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1. **INVESTIGATOR’S RESPONSE TO Review statement from NON-FUNDED GRANt APPLICATION**

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| --- | --- |
| Name of Non-Funded Grant Application :  (e.g. CSA, MOE Tier II grant, etc) |  |
| Date of Submission : |  |

Please provide the review statement(s) from the non-funded grant application and the applicant’s response. Please use Arial font size 10, single-spaced.

Click here to enter text.

1. **BIOGraphical SKETCH**

Applicant to provide a no more than 3-page NIH-style (using template in ANNEX A) or NMRC-style biographical sketch. A sample NIH biographical sketch has been provided for your reference.

1. **Proposed Budget**

Awards are funded at a maximum of S$125,000 for a period of 1 year. Please prepare the budget carefully under each category. Funds cannot be utilised for salary support of the Principal Investigator. Up to S$5,000 can be budgeted for travel support for the Principal Investigator or research personnel who are working on the project. The Principal Investigator is required to complete the Equipment Purchase Approval Form (using template attached) for submission together with the KBrFA application form, if budgeting for any single equipment purchase in excess of S$5,000 (inclusive of GST). Budget must include GST, wherever applicable.

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|  | **Year 1** | **Total (S$)** |
| **EXPENDITURE ON MANPOWER (EOM)** | | |
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| **Sub-total (S$)** |  |  |
| **OTHER OPERATING EXPENDITURE (OOE)** | | |
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| **Sub-total (S$)** |  |  |
| **EQUIPMENT** | | |
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| **Sub-total (S$)** |  |  |
| **Grand Total (S$)** |  |  |

1. **PLANS FOR EXPENDITURE OF REQUESTED BRIDGE FUNDS**

Please provide brief details of plans for the utilisation of the bridge funds.

Click here to enter text.

1. **PLANS TO SECURE OTHER SOURCES OF FUNDING**

Please provide details of plans to secure other sources of funding (e.g. revise unsuccessful grant application, obtain preview of revised grant prior to submission, engage a mentor, enroll in a grant writing course, etc).

Click here to enter text.

1. **DECLARATION OF CURRENT FUNDING**

Please declare **ALL** sources of active funding support and / or funding support applied by the applicant (in capacity as Principal Investigator) which are currently pending result outcome.

1. **Funding Currently Held**

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| --- | --- | --- | --- | --- | --- |
| **S/N** | **Name of Grant / Funding Agency** | **Project Title** | **Amount** | **Start Date** | **End Date** |
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**(b) Funding Applied For And Currently Pending Outcome**

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| **S/N** | **Name of Grant**  **/ Funding Agency** | **Project Title** | **Amount** | **Start Date** | **End Date** |
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1. **Letter of SUPPORT by ACP Chair / SRP Director**

ACP Chair / SRP Director to provide a letter of support (1-page) stating his / her endorsement, including commitment of the ACP / SRP to support the applicant’s salary during the bridge funding period, and allowing the applicant the necessary time to undertake the project.

Please use Arial font size 10, single-spaced.

Click here to enter text.

ENDORSEMENT BY ACP CHAIR / SRP DIRECTOR:

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| **Name of ACP Chair / SRP Director** |  | **Signature and Date** |

1. **UNDERTAKING BY PRINCIPAL INVESTIGATOR:**

In submitting the proposal, the Principal Investigator undertakes to:

* Declare that all information is accurate and true.
* Declare that he/she meets the eligibility criteria of the KBrFA programme.
* Submit supporting documents of ethics approval obtained from the relevant Institutional Review Board (IRB) and Animal Ethics Committee for studies involving human subjects and animal experimentation respectively, prior to initiation of the studies.
* Be actively engaged in the execution of the research and comply with all laws, rules and regulations pertaining to animal and human ethics, including the Singapore Good Clinical Practice guidelines.

Please check accordingly:

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| --- | --- |
|  | I accept the above undertaking. |
|  | I do not accept the above undertaking. |

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| **Name of Principal Investigator** |  | **Signature and Date** |

**NOTE:**

1. **Review Process**: Proposals will be anonymously assessed by two faculty members in the Duke/Duke-NUS/SingHealth Academic Medical Centre axis with the appropriate expertise, who will prepare an assessment statement for each proposal based on the review criteria. The assessment statements and proposal will be reviewed by a Bridge Funding Committee appointed by the Dean of Duke-NUS. The earliest start date for funded projects is 1 April 2021.
2. **Review Criteria**: Proposals will be evaluated based on the following criteria:
   1. **Scientific Merit** – What is the scientific merit and feasibility of the proposed studies?
   2. **Principal Investigator** – Has the applicant demonstrated an aptitude and attitude towards excellence in science?
   3. **Relevance and Potential Impact** – What is the likelihood that the bridge funding will lead to future external funding of this proposal?
   4. **Need for Bridge Funding** – Is the Principal Investigator in need of the bridge funding, or does it appear that he / she already has sufficient support during the period?

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| Mentor (Last, First, Middle): | |  | | |
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| BIOGRAPHICAL SKETCH **DO NOT EXCEED THREE PAGES.** | | | | |
|  | | | | |
| NAME | | POSITION TITLE | | |
|  | |
| EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)* | | | | |
| INSTITUTION AND LOCATION | DEGREE  *(if applicable)* | | YEAR(s) | FIELD OF STUDY |
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**NOTE: The Biographical Sketch may not exceed three pages. Follow the formats and instructions on the attached sample.**

1. **Positions and Honors.** List in chronological order previous positions, concluding with your present position. List any honors.
2. **Selected peer-reviewed publications (in chronological order).** Do not include publications in preparation.
3. **Research Support.** Listongoing or research projects (competitive and institutional support). Begin with the projects that are most relevant to the research proposed in this application. Briefly indicate the overall goals of the projects and your role (e.g. PI, Co-Investigator) in the research project. List total award amounts for each.

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| Mentor (Last, First, Middle): | | PI Name | | |
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| (SAMPLE) BIOGRAPHICAL SKETCH **DO NOT EXCEED THREE PAGES.** | | | | |
|  | | | | |
| NAME  Carlucci, Joseph Louis | | POSITION TITLE  Professor of Microbiology | | |
|  | |
| EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)* | | | | |
| INSTITUTION AND LOCATION | DEGREE  *(if applicable)* | | YEAR(s) | FIELD OF STUDY |
| Stanford University | Ph.D. | | 1964 | Infectious Diseases |
| Harvard Medical School | M.D. | | 1972 | Medicine/Parasitology |
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1. **Positions and Honors.**

**Positions and Employment**

* 1. Medical Residency, Internal Medicine, Harvard Medical School

1971-1974 EIS Officer, Hospital Infection Section, Bacterial Diseases Branch, CDC, Atlanta, GA

* 1. Instructor in Infectious Diseases, Massachusetts General Hospital, Boston, MA

1. Senior Associate in Infectious Diseases, Children’s Hospital, Boston, MA
   1. Assistant Professor of Pediatrics, Harvard Medical School
   2. Chief, Hemostasis Laboratory, Children’s Hospital, Boston, MA
2. Professor of Pediatrics, Harvard Medical School, Boston, MA

1998- Professor, Dept. of Infectious Diseases, Harvard School of Public Health

**Other Experience and Professional Memberships**

* 1. Acting Chief, National Mucosal Infections Study
  2. Director of Infectious Diseases Laboratory

1975-present Hospital Epidemiologist (Medical Director Infection Control 2000-present), Children’s Hospital, Boston

* 1. President, Society of Hospital Epidemiologists of America

1989-present Medical Director Quality Assurance, Children’s Hospital, Boston, MA

* 1. Director, American Society for Microbiology, Division F
  2. Hospital Infection Control Practices Advisory Committee, Centers for Disease Control

1998-present Vice-Chair for Health Outcomes, Dept. of Medicine, Children’s Hospital

1998-2001 Steering Committee, NACHRI/CDC Pediatric Prevention Network

**Honors**

1. SERC Advanced Research Scholarship, Infectious Disease Society of America

2001 Anthony Steinway Award for Excellence in Teaching (Children’s Hospital)

1. **Selected peer-reviewed publications (in chronological order).**

(Publications selected from 133 peer-reviewed publications)

1. Luciani JM, Casper J, Goodman BF, Shaw CM, Carlucci JL. Prevention of respiratory virus infections through compliance with frequent hand-washing routines. N Engl J Med 1988 ;318:389-394.
2. Gussmann J, Pratt R, Sideway DG, Sinclair JM, Emmerson MF, Carlucci JL. Coagulase-negative staphylococcal bacteremia in the changing neonatal intensive care unit population. Is there an epidemic? JAMA. 1988;158:1548-1552.
3. Gussmann J, Carlucci JL, McGovern JE, Jr., Methodologic issues in nursing home epidemiology. Rev Infect Dis 1989;11:1119-1141.
4. Gussmann J, Emmerson MF, Smyth NE, Platt RI, Sidebottom DG, Carlucci JL. Early hospital release and antibiotic usage with nosocomial staphylococcal bacteremia in two neonatal intensive care unit populations. Amer J Dis Child 1991;149:325-339.
5. Murphy JA, Black RW, Schroeder LC, Weissman ST, Gussman JM, Carlucci JL, Short CJ. Quality of care for children with asthma: the role of social factors and practice setting. Pediatrics 1996;98:379-84.
6. Gussmann J, Carlucci JL, McGovern JE, Jr. Incidence of Staphylococcus epidermidis catheter-related bacteremia by infusions. J Infect Dis 1996;172:320-4.
7. Carlucci JL, Huskins WC. Control of nosocomial antimicrobial-resistant bacteria A strategic priority for hospitals worldwide. Clin Infect Dis 1997;S139-S145.
8. Corning WC, Saylor BM, O’Steen C, Gulapagos L, O’Reilly EJ, Carlucci JL. Hospital infection prevention and control: A model for improving the quality of hospital care in low income countries. Infect Control Hosp Epi. 1999;13:123-35.
9. Handler CJ, Marriott B, Clearwater PT, Carlucci JL. Quality of care at a children’s hospital: the child’s perspective. Arch Pediatr Adolesc Med. 1999;143:1120-7.
10. McKinney D, Poulet KL, Wong Y, Murphy V, Ulright M, Dorling G, Long JC, Carlucci JL, Piper GB. Protective vaccine for Staphylococcus aureus. Science 1999;214:1421-7.
11. Gulazzii L, Kispert ZT, Carlucci JL, Corning WC. Risk-adjusted mortality rates in surgery: a model for outcome measurement in hospitals developing new quality improvement programs. J Hosp Infect 2000;24:33-42.
12. Huebner J, Qui A, Krueger WA, Carlucci JL, Pier GB. Prophylactic and therapeutic efficacy of antibodies to a capsular polysaccharide shared among vancomycin-sensitive and resistant enterococci. Infect Inmmun 2000; 68:4631-6.
13. Levitan O, Sissy RB, Kenney J, Buchwald E, Maccharone AB, Carlucci JL. Enhancement of neonatal innate defense: Effects of adding an recombinant fragment of bactericidal protein on growth and tumor necrosis factor-inducing activity of gram-positive bacteria tested in vivo. Immun 2000;38:3120-25.
14. Garletti JS, Harrison MC, Collin PA, Miller CD, Otter D, Shaker C, Wren M, Carlucci JL, Makato DG. A randomized trial comparing iodine to a alcohol impregnated dressing for prevention of catheter infections in neonates. Pediatrics. 2001;127:1461-6.
15. Corning WC, Barillo K, Festival MR, Lingonberry S, Lumbar P, Peters A, Pursons M, Carlucci JL, Tella JE. A national survey of practice variation in the use of antibiotic prophylaxis in heart surgery. J Hosp Infect. 2001;33:121-5.
16. Hoboken S, Peterson D, Graveldy L, Carlucci JL. Compliance with hand hygiene practice in pediatric intensive care. Pediatric Crit Care Med. 2001;12:211-214.
17. Hasker S, Pittoui D, Gray L, Zaruccii A, Potter G, Seemore MH, Carlucci JL. Interventional study to evaluate the impact of an antibiotic-infused hand gel in improving hand hygiene compliance. Pediatr Infect Dis J. Accepted for publication.
18. Lander C, Summers R, Murray S, Hummer CJ, Carlucci JL. Pediatrics: Is hospital food more nutritional than mom’s cooking? Pediatrics 2001;11: 140-145.
19. **Research Support**

# Ongoing Research Support

R01 HS35793 Carlucci (PI) 9/01/99-8/30/04 Total award: $950,000

AHRQ

Reducing Antimicrobial Resistance in Low-Income Communities: A Randomized Trial.

This study is a randomized trial of interventions to reduce antimicrobial usage and resistance in low-income communities.

Role: PI

2 R01 AI12345-05 Carlucci (PI) 4/01/01-3/31/06 Total award: $765,000

NIH/NIAID

Bacteriology and Mycology Study of ICU Patients at Risk for Antimicrobial Resistant Bacterial Infections.

The study will perform clinical trials of interventions to reduce antimicrobial resistant infections.

Role: PI

Institutional start-up funds 7/01/06 – 6/30/07 Annual amount: $250,000

Role: PI

## **DUKE-NUS MEDICAL SCHOOL**

## **EQUIPMENT PURCHASE APPROVAL FORM**

## **(At the time of grant application)**

Please complete this form to seek approval if you are budgeting for any **single equipment purchase** in excess of **S$5,000.00** [inclusive of Goods and Services Tax (GST)] to be supported under the award.

**1) GRANT INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Award Type:** | Khoo Bridge Funding Award | | |
| **Project Title:** |  | | |
| **Host Institution:** |  | **Department:** |  |
| **Principal Investigator:** |  | | |

**2)** **LIST OF EQUIPMENT PURCHASES FOR APPROVAL**

For single equipment purchases that are more than S$5,000.00 (inclusive of GST) each.

|  |  |  |
| --- | --- | --- |
| **No.** | **Equipment Description** | **Amount Requested (S$)**  (inclusive of GST) |
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**3) JUSTIFICATIONS FOR Equipment purchase**

Please provide justifications for the equipment purchases listed in Section 2.

**Requested by:**

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| --- | --- | --- | --- | --- |
| Name of Principal Investigator |  | Signature |  | Date |

**Supported by:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Research Director or the designated authority of Host Institution |  | Signature |  | Date |

# For Official Use only

# *\*Please delete accordingly.*

# I approve/do not approve\* this equipment purchase request.

|  |  |  |
| --- | --- | --- |
| Name and SignatureChair, Khoo Bridge Funding Award Review CommitteeDuke-NUS Medical School |  | Date |

**Personal Data Notice & Consent**

**For**

**Grants & Awards Managed and Administered by Duke-NUS Medical School**

1. National University of Singapore (“NUS”) through its Duke-NUS Medical School (“Duke-NUS”) manages and administers grants and awards and the applications for the same. To do so, NUS will necessarily need to collect, use, disclose and/or process certain personal data or personal information submitted or otherwise made available to NUS by an individual in an application for a grant or award (the “**Applicant**”).
2. Such personal data will be collected, used, disclosed and/or processed by NUS for the purpose(s) of:
3. Administering, managing and/or processing the Applicant’s application for a grant or award, sending the Applicant materials on the grantor awards applied for, and obligations thereunder, via postal mail, electronic mail, fax or voice calls;
4. Administering and/or managing the Applicant’s relationship with NUS (including the mailing of correspondence, statements or notices to the Applicant, which could involve the disclosure of certain personal data about the Applicant to bring about delivery of the same, as well as on the external cover of envelopes / mail packages);
5. Carrying out screening activities (including background checks and/or obtaining of references and/or other information about the Applicant from the Applicant’s previous education institute(s), employers) or other due diligence in accordance with legal or regulatory obligations or risk management procedures that may be required by law or that may have been put in place by NUS;
6. Responding to any enquiries by the Applicant;
7. Investigating fraud, misconduct, any unlawful action or omission relating to the Applicant’s application for a grant, whether or not there is any suspicion of the aforementioned;
8. Responding to requests for information from public agencies, ministries, statutory boards or other similar authorities (including but not limited to the Immigration and Checkpoint Authority, Ministry of Defence, Ministry of Education and Ministry of Health) or non-government agencies authorized to carry out specific Government services or duties from time to time;

Where the Applicant is awarded the grant or award, the following purposes shall apply in addition to the aforementioned purposes set out in (b) to (f) which continue to apply until the grant or award comes to an end:

1. Administering and/or managing the successful Applicant’s grant or award, which may include use and disclosure of personal data to related grant funding organisations, donors, external evaluators and/or external organisations for purposes of periodic reports as may be required under the grant or award conditions, and/or event invitations.
2. Maintaining campus safety and security of persons and property (including the use of CCTVs), where the successful Applicant is given access to NUS premises and facilities;
3. Invitation to participate in publicity materials, feature stories, events and other engagement activities relating to academic support, student support, financial assistance programs and merit-based awards made possible by donors, where the Applicant is a successful recipient, beneficiary and/or participant;
4. Carrying out market related or similar research and analysis for NUS’ operational strategy and policy planning purposes;
5. Taking of photographs and/or videos (whether by NUS staff or third party photographers and/or videographers) during events or seminars organised by NUS or its affiliates for publicity purposes (including in NUS’ publicity and communications materials).

l) Transferring and disclosing the successful Applicant’s personal data to overseas partner institutions to review, manage, process the application and/or assess the Applicant’s research. In such event NUS, through Duke-NUS will only share the personal data relevant and required to assess the research carried out under the grant or award.

1. Such personal data of the Applicant may be disclosed by NUS to third party service providers or agents (whether in Singapore or elsewhere in the world where such service providers are sited) for one or more of the above Purposes, as such third party service providers or agents, if engaged by NUS, would be processing the Applicant’s personal data for NUS, for one or more of the above Purposes.
2. By completing and submitting the grant application form to Duke-NUS, the Applicant:
3. Declares and warrants that for any personal data of other individuals disclosed by the Applicant in connection with the grant application, the Applicant has, prior to disclosing such personal data in the grant application form to Duke-NUS, obtained the consent from the individuals whose personal data are being disclosed, to permit NUS through Duke-NUS to collect, use and disclose such personal data for purposes related to this application,
4. Consents to NUS collecting, using, disclosing and/or processing the Applicant’s personal data for the Purposes as described above; and
5. Consents to NUS transferring the Applicant’s personal data out of Singapore to NUS’s third party service providers or agents and/or partner institutions for the Purposes as described above.
6. If the Applicant has any questions relating to NUS’s collection, use and disclosure of the Applicant’s personal data, the Applicant may contact the NUS Data Protection Office at dpo@nus.edu.sg or call 6776 2835 or such other person as NUS may designate, from time to time and informing the Applicant through letter, circular, notice or email.
7. For the avoidance of doubt, in the event that Singapore personal data protection law permits an organization such as NUS to collect, use or disclose the Applicant’s personal data without the Applicant’s consent, such permission granted by the law shall continue to apply.

**BEFORE YOU SUBMIT THE GRANT APPLICATION FORM TO DUKE-NUS, CAREFULLY READ THE ABOVE CONTENTS OF THIS DOCUMENT. BY SUBMITTING THE APPLICATION, YOU ACKNOWLEDGE THAT YOU HAVE READ AND FULLY UNDERSTAND THE CONTENTS OF THIS DOCUMENT AND YOU HEREBY GIVE YOUR CONSENT AS SET OUT ABOVE AS WELL AS CONSENT TO NUS COLLECTING, USING, DISCLOSING, PROCESSING AND/OR TRANSFERING OUT OF SINGAPORE, YOUR PERSONAL DATA FOR ONE OR MORE OF THE PURPOSES DESCRIBED IN THIS DOCUMENT.**