HEALTH WEALTH CAREER

# 2018 BENEFIT SURVEY
## GOING DIGITAL!

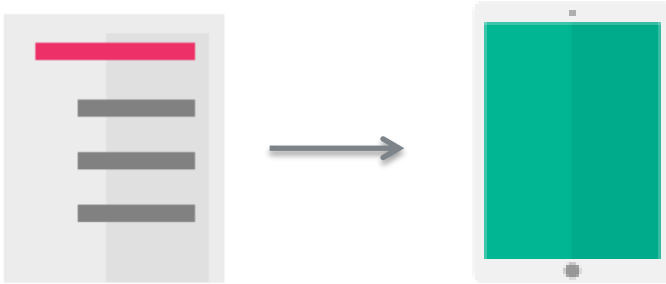
SOUTH KOREA

2018

MAKE TOMORROW, TODAY MERCER

# 2018 BENEFITS SURVEY
## GOING DIGITAL!

### WHAT'S CHANGING?



From Excel survey questionnaire to online survey platform

### WHAT REMAINS?

- If you have participated in previous years, your data will be pre-filled in the survey
- Excel import/export function is available on online platform

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# AGENDA
## 2018 BENEFITS SURVEY

1. Going Digital – What to expect?
2. What's new in 2018
3. Structure of Questionnaire & Instructions to fill DCK
4. General points of attention
5. Specific points of attention

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# GOING DIGITAL – WHAT TO EXPECT?

SECTION-1

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# DCK DISTRIBUTION & SUBMISSION

## GOING DIGITAL – WHAT TO EXPECT?

- Data Collection Kit (DCK) – shared with client via email on the survey link

  - Client can submit via the new online interactive system OR

  - Client can download excel format by clicking on the *Import/Export* button once they are in the 1st page of survey.

- Further clarifications on DCKs can also be obtained via local Mercer contacts

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# YOUR PARTICIPATION MATERIAL ARE READY

## GOING DIGITAL – WHAT TO EXPECT?

MERCER MAKE TOMORROW, TODAY

YOUR PARTICIPATION MATERIALS ARE READY!

You may now access your Participation Materials for:

| Participation Materials | Submission Deadline |
|---|---|
| **2018 <Country> MBM (Q3)** | **April 27, 2018** |

The online questionnaire for **2018 <Country> MBM (Q3) Survey** is now available for you to complete.

*Please note for those companies with multiple contacts, be aware that you should not use the same link at the same time as it may cause issues when saving the data.*

In order to publish the survey results on time, all data must be received by **April 27, 2018**.

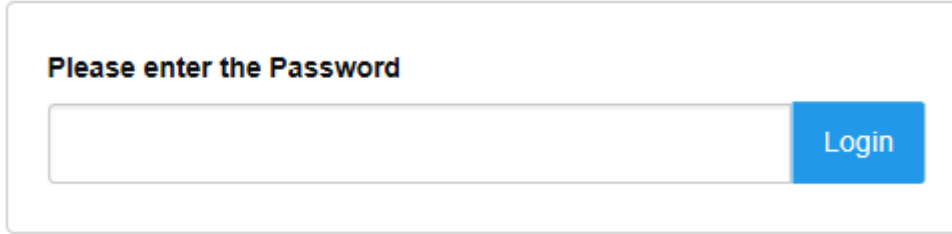
TO ACCESS YOUR QUESTIONNAIRE:

DCK distribution
Client Notification

Password
nmunication to cli

# LOGIN PAGE

## GOING DIGITAL – WHAT TO EXPECT?




**PLEASE NOTE THAT PASSWORD WILL BE SHARED WITH YOU IN A SEPARATE MAILER.**

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# WELCOME

## GOING DIGITAL – WHAT TO EXPECT?

MERCER BENEFITSMONITOR™ Help

Welcome

### South Korea - Benefits Survey (BENEFITSMONITOR™)

July 2018

Please read through Definitions Guide and Input instructions Page via (help link) before filling up the survey with your organization's data and employee information. To ensure a high quality report, we encourage you to provide up-to-date and complete information to the best of your knowledge.
For questions or assistance, please contact :

### Mercer Contact

Jihee Kim
+82 2 3404 8374
Jihee.Kim@mercer.com

Submission Deadline : April 27th 2018

Next

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# TERMS & CONDITIONS

## GOING DIGITAL – WHAT TO EXPECT?

**Kindly read through the Terms and Conditions and provide your agreement before the start of survey.**

Data Collection Survey - Terms and Conditions

**TERMS AND CONDITIONS IN RELATION PARTICIPATION IN THE SURVEY (THE "SURVEY")**

**IMPORTANT - PLEASE READ THESE TERMS AND CONDITIONS CAREFULLY BEFORE AGREEING TO PARTICIPATE IN THE SURVEY.**

THE COPYRIGHT, DATABASE RIGHTS AND ANY OTHER INTELLECTUAL PROPERTY RIGHTS IN THE PROGRAMS AND DATA CONTAINED WITHIN THE SURVEY OR ANY REPORT TOGETHER WITH ANY ITEMS THAT ARE/WERE PROVIDED TO YOU IN CONNECTION WITH THE PRODUCTS OR SERVICES RELATING TO THE SURVEY OR REPORT, ARE AND REMAIN THE PROPERTY OF MERCER AT ALL TIMES. YOU ARE LICENSED TO USE THEM ONLY IF YOU ACCEPT ALL THESE TERMS AND CONDITIONS, AND IN ANY CASE, ONLY TO THE EXTENT SET OUT HEREIN.

BY PROCEEDING TO PARTICIPATE IN THE SURVEY, YOU CONFIRM YOUR ACCEPTANCE OF AND AGREEMENT TO, ON BEHALF OF YOURSELF AND YOUR EMPLOYER, OF ALL THE TERMS AND CONDITIONS AS SET OUT HEREIN ("**AGREEMENT**").

THIS AGREEMENT CONSTITUTES THE ENTIRE AGREEMENT BETWEEN YOU AND MERCER AND IT SUPERSEDES ANY AND ALL PRIOR AGREEMENTS OR REPRESENTATIONS YOU RECEIVED RELATING TO THE SUBJECT MATTER OF THIS AGREEMENT, PROVIDED THAT IF YOU HAVE SIGNED UP FOR, OR SIGN UP FOR, ANY SURVEY MEMBERSHIP/SUBSCRIPTION PURSUANT TO ANY MERCER MEMBERSHIP/SUBSCRIPTION FORM OR OTHERWISE ("MEMBERSHIP/SUBSCRIPTION"), THEN THE RELEVANT MEMBERSHIP/SUBSCRIPTION TERMS AND CONDITIONS SHALL, TO THE EXTENT INCONSISTENT WITH THIS AGREEMENT, PREVAIL.

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# COMPANY INFORMATION

## GOING DIGITAL – WHAT TO EXPECT?

Company Information

Company Name *

Industry *

Chemical

Activity *

All

Address *

123 Singapore Road #01-01

City

ZIP/Postal Code

123456

Country for which Questionnaire is being filled

Singapore

1. Company Name will need to be filled up.
2. For repeat participants rest of fields pre-populated.
3. Do validate the details and update where necessary.

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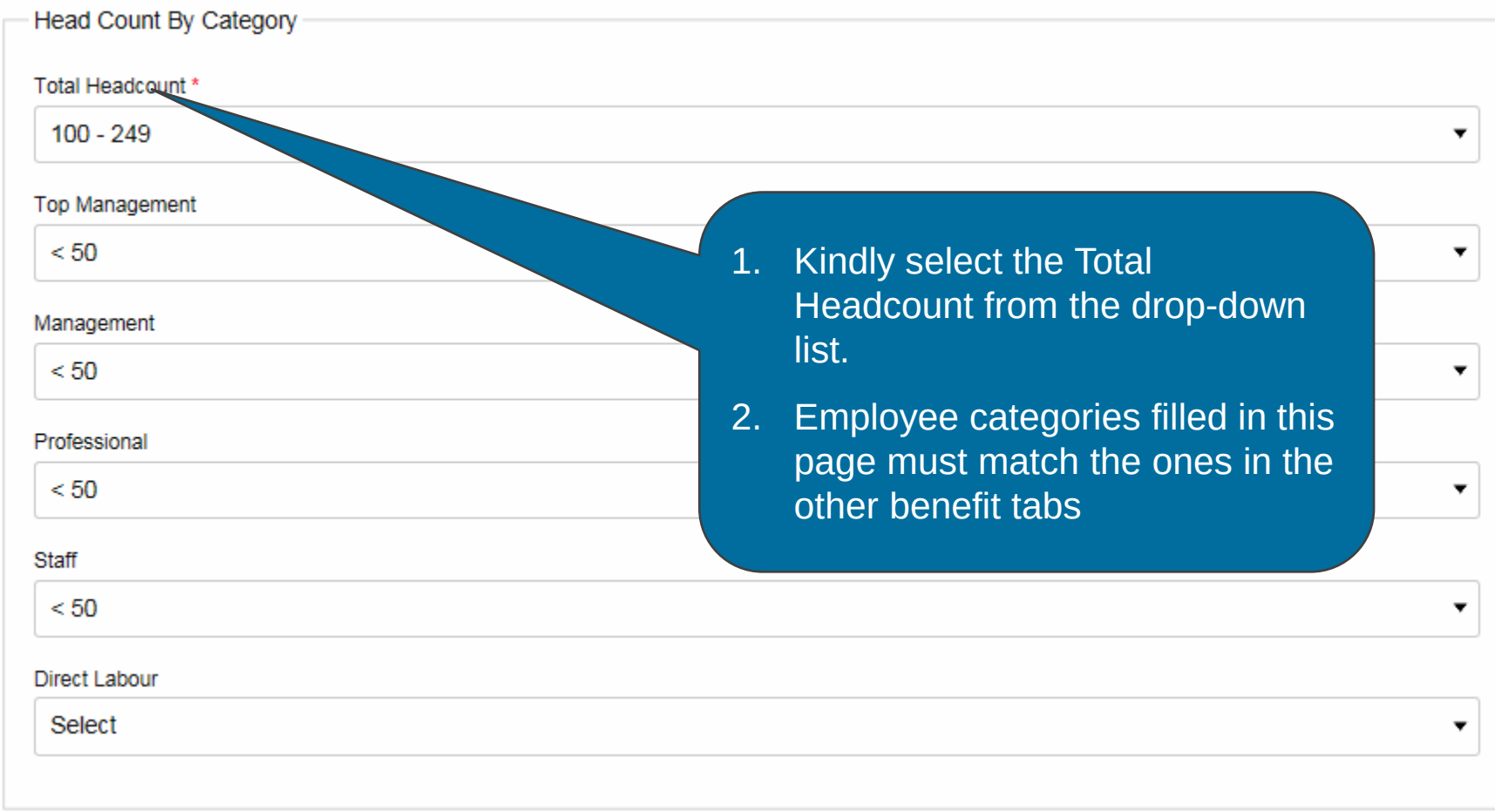
# HEAD COUNT BY CATEGORY

## GOING DIGITAL – WHAT TO EXPECT?




1. Kindly select the Total Headcount from the drop-down list.
2. Employee categories filled in this page must match the ones in the other benefit tabs

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# CONTACT PERSON

## GOING DIGITAL – WHAT TO EXPECT?

Contact Person

Name of Person Completing Questionnaire *

Title *

Email *

Telephone *

Fax *

Copy contact person details below

Name of Person to Contact *

Title *

Email *

Telephone *

Fax *

1. Kindly fill up the contact details of the person who is completing the questionnaire.
2. Should the person to contact in case of any questions pertaining to the information provided be different, do provide the details of the person as well. If not, you can click on “Copy contact person details below”.

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# SURVEY NAVIGATION

## GOING DIGITAL – WHAT TO EXPECT?

Click here to toggle table of contents

Page navigation – click here to go to next or previous page

MERCER BENEFITSMONITOR™ 1 1 of 29 Import/Export Help Audit Summary Save & Exit

Employment Conditions

Hide Contents

Contents

- Edit Company Data
- Employment Conditions 1
  - Employment Conditions
  - Re-employment of Retiring Employees
- Work Life Harmony Benefits
  - Flexible Working Arrangements
  - Family Support
  - Employee Support / Mental Health
  - Wellness Program
  - Work Life Harmony - Others
- Annual Leave
  - Annual Leave
- Parental Leave
  - Parental Leave
  - Foreign Employees
  - Other Family Care Leaves
- Other Leave Types 5
  - Eligibility for Other Leave Types
  - Sick and Hospitalization Leave
  - Prolonged Medical Leave
  - Miscarriage Leave
  - Volunteerism Leave
  - Sabbatical Leave
  - Study / Exam Leave
- Congratulations & Condolences
  - Congratulations

Table of contents – click to browse through survey sections

Click here to launch the "Help" page in a separate window

| | Plan 1 | Plan | | |
|---|---|---|---|---|
| Top Management | ○ | ✓ | | |
| Management | ○ | ✓ | | |
| Professional | ✓ | ○ | ○ | ○ |
| Staff | ✓ | ○ | ○ | ○ |
| Direct Labour | ✓ | ○ | ○ | ○ |

**Employment Conditions**

| | | | | |
|---|---|---|---|---|
| 1 What is the number of working days per week in your organization? (Days/Numeric) | 5 | 5 | | |
| 2 What is the number of working hours per day excluding lunch and tea breaks? (Hours/Numeric) | 8 | 8 | | |
| 3 Do you have a probation period? (Y or N) | ✓ | ✓ | ○ | ○ |
| *3.1 Duration of probation period in months:* (Months/Numeric) | 3 | 3 | | |
| 4 Resignation notice period, in weeks, required during probation period: (Weeks/Numeric) | 1 | 4 | | |
| 5 Resignation notice period, in months, required after probation | 1 | 3 | | |

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# EXPORTING TO & IMPORTING FROM EXCEL

## GOING DIGITAL – WHAT TO EXPECT?

If required, click here to launch import/ export function

MERCER BENEFITSMONITOR™ 1 1 of 29 Import/Export Help Audit Summary Save & Exit

Employment Conditions

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  - Employment Conditions
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  - Family Support
  - Employee Support / Mental Hea
  - Wellness Program
  - Work Life Harmony - Others
- Annual Leave
  - Annual Leave
- Parental Leave
  - Parental Leave
  - Foreign Employees
  - Other Family Care Leaves
- Other Leave Types 5
  - Eligibility for Other Leave Types
  - Sick and Hospitalization Leave
  - Prolonged Medical Leave
  - Miscarriage Leave
  - Volunteerism Leave
  - Sabbatical Leave
  - Study / Exam Leave
- Congratulations & Condolences
  - Congratulations

**Import / Export Questionnaire**

Download Questionnaire:

**Step 1**: Download the survey as an excel and fill your inputs

Upload Questionnaire: Browse... Upload

**Step 2**: Browse to select the updated file and click upload *(Note: changes validation checks will apply online after upload)*

organization? (Days/Numeric)

2 What is the number of working hours per day excluding lunch and tea breaks? (Hours/Numeric)

3 Do you have a probation period? (Y or N)

*3.1 Duration of probation period in months:* (Months/Numeric) 3 3

4 Resignation notice period, in weeks, required during probation period: (Weeks/Numeric) 1 4

5 Resignation notice period, in months, required after probation 1 3

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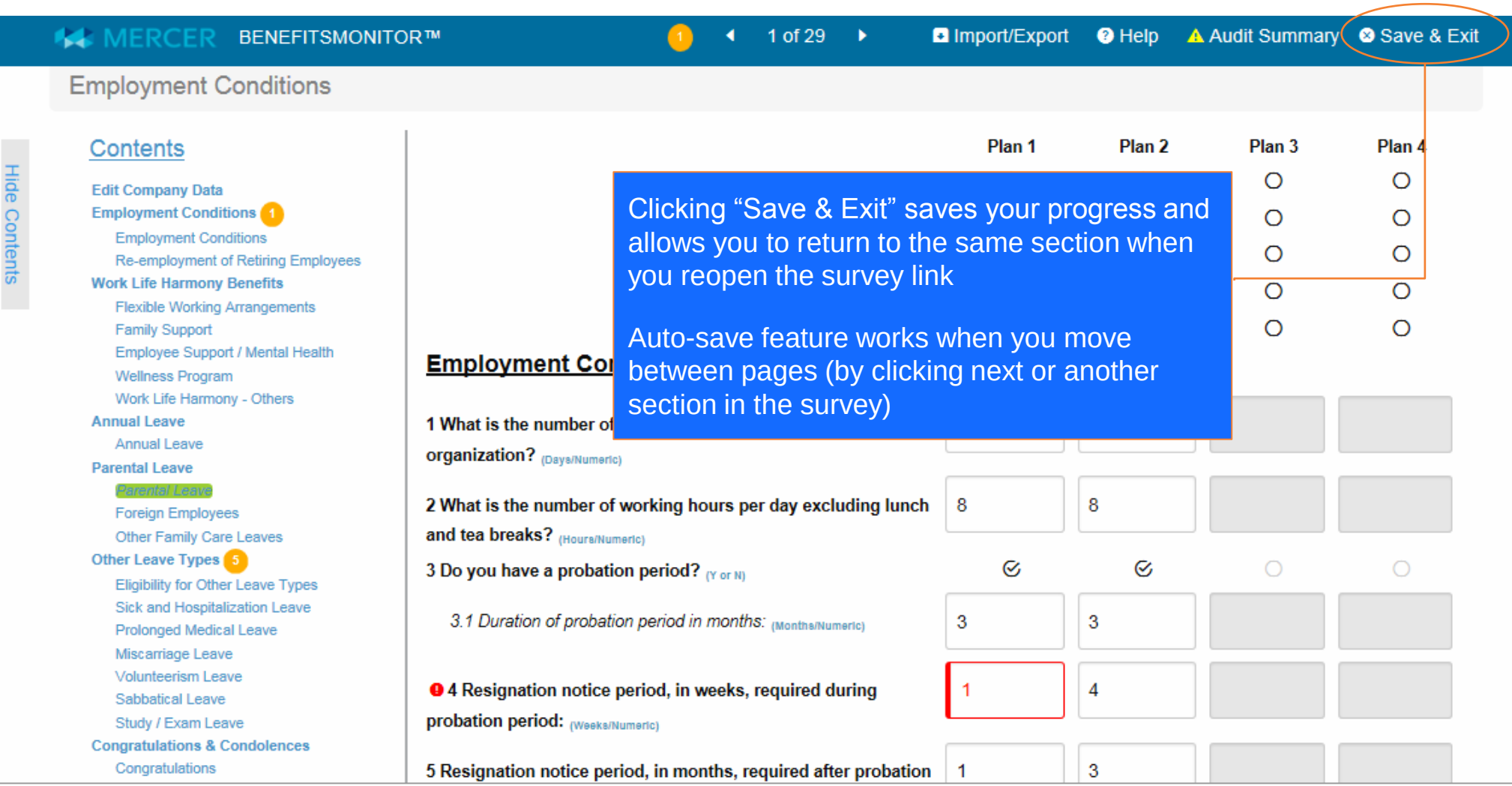
# SAVING YOUR PROGRESS

## GOING DIGITAL – WHAT TO EXPECT?




Clicking "Save & Exit" saves your progress and allows you to return to the same section when you reopen the survey link

Auto-save feature works when you move between pages (by clicking next or another section in the survey)

# ADDRESSING ERRORS (1/2)

## GOING DIGITAL – WHAT TO EXPECT?

Page error indicator (orange) – shows the number of errors in this page

Click here to launch the error audit summary *(cont. next page)*

MERCER BENEFITSMONITOR™ 1 1 of 29 Import/Export Help Audit Summary Save & Exit

Employment Conditions

Hide Contents

Contents

- Edit Company Data
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- Other Leave Types 5
  - Eligibility for Other Leave Types
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  - Prolonged Medical Leave
  - Miscarriage Leave
  - Volunteerism Leave
  - Sabbatical Leave
  - Study / Exam Leave
- Congratulations & Condolences
  - Congratulations

Error indicators (orange) in the contents tab shows the number of errors in each tab

| | Plan 1 | Plan 2 | Plan 3 | Plan 4 |
|---|---|---|---|---|
| Top Management | ○ | ✓ | ○ | ○ |
| Management | ○ | ✓ | ○ | ○ |
| Professional | ✓ | ○ | ○ | ○ |
| Staff | ✓ | ○ | ○ | ○ |
| Direct Labour | ✓ | ○ | ○ | ○ |

**Employment Conditions**

| | Plan 1 | Plan 2 | Plan 3 | Plan 4 |
|---|---|---|---|---|
| 1 What is the number of working days per week in your organization? (Days/Numeric) | 5 | 5 | | |
| 2 What is the number of working hours per day excluding lunch and tea breaks? (Hours/Numeric) | 8 | 8 | | |
| 3 Do you have a probation period? (Y or N) | ✓ | ✓ | | |
| *3.1 Duration of probation period in months:* (Months/Numeric) | 3 | 3 | | |
| 4 Resignation notice period, in weeks, required during | 1 | 4 | | |
| 5 Resignation notice period, in months, required after probation | 1 | 3 | | |

Plan 1: Please provide response in valid range. (Minimum: 2 , Maximum: 12)

Hover your mouse over the question error indicator (red) to view details

# ADDRESSING ERRORS (2/2)

## GOING DIGITAL – WHAT TO EXPECT?

Click here to launch the error audit summary

MERCER BENEFITSMONITOR™ 1 1 of 29 Import/Export Help Audit Summary Save & Exit

Employment Conditions

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Parental Lea
Parental
Foreign Employees
Other Family Care Leaves
Miscarriage Leave
Volunteerism Leave
Sabbatical Leave
Study / Exam Leave
Congratulations & Condolences
Congratulations

### Audit Summary

System has found following issues in the responses.

| Action | Page header | Question Description | Issue Description |
|---|---|---|---|
| 4 | Employment Conditions | Resignation notice period, in weeks, required during probation period: | Plan 1: Please provide response in valid range. (Minimum: 2 , Maximum: 12) |
| 5.4.5 | Other Leave Types | 13th to 18th month | Plan 1: Please provide numbers only. |
| 5.4.5 | Other Leave Types | 13th to 18th month | Plan 1: Please provide response in valid range. (Minimum: 20 , Maximum: 100) |

Click here to go to the question in the survey

| | Plan 4 | | | |
|---|---|---|---|---|
| 2 What is the number of working hours per day excluding lunch and tea breaks? (Hours/Numeric) | 8 | 8 | | |
| 3 Do you have a probation period? (Y or N) | ✓ | ✓ | | |
| 3.1 Duration of probation period in months: (Months/Numeric) | 3 | 3 | | |
| 4 Resignation notice period, in weeks, required during probation period: (Weeks/Numeric) | 1 | 4 | | |
| 5 Resignation notice period, in months, required after probation | 1 | 3 | | |

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# HOW TO SUBMIT SUBMISSION

## GOING DIGITAL – WHAT TO EXPECT?

- Acting Allowance
- **Perquisites** 2
  - Golf Club Membership
  - Recreational Club Membership
  - Professional Club / Association Membership
  - Fitness Club Membership
  - Claw Back Policy
  - Lifestyle Benefit
  - Mobile Devices
  - Parking
  - Discount on Company Products
  - Long-Service Allowance / Award
- **Referral Program** 2
  - Referral Program
- **Locally Hired Foreigners** 2
  - Locally Hired Foreigners
- **Submit**

Click here to Submit the Data

10.1.1 Premium sharing (Y or N)

10.1.2 Claim sharing (Y or N)

10.1.3 Maximum claimable amount (Y or N)

10.1.4 Please elaborate: (Any Response)

*10.2 Insurance benefits* (Y or N)

10.2.1 Premium sharing (Y or N)

10.2.2 Coverage (Y or N)

10.2.3 Please elaborate: (Any Response)

*10.3 Medisave contributions* (Y or N)

10.3.1 Please elaborate: (Any Response)

*10.4 Annual leave* (Y or N)

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# IDENTIFYING NEW QUESTIONS

## GOING DIGITAL – WHAT TO EXPECT?

MERCER BENEFITSMONITOR™ 1 1 of 29 Import/Export Help Audit Summary Save & Exit

Parental Leave

Hide Contents

Contents

Sections with questions newly added this year are highlighted in green – click to view

Flexible Working Arrangements
Family Support
Employee Support / Mental Health
Wellness Program
Work Life Harmony - Others
Annual Leave
Annual Leave
Parental Leave
Parental Leave
Foreign Employees
Other Family Care Leaves
Other Leave Types 5
Eligibility for Other Leave Types
Sick and Hospitalization Leave
Prolonged Medical Leave
Miscarriage Leave
Volunteerism Leave
Sabbatical Leave
Study / Exam Leave
Congratulations & Condolences
Congratulations

**Parental Leave**

**1 How many days of paid parental leave do you provide for full time employees?**

| | | | | |
|---|---|---|---|---|
| *1.1 Maternity Leave combined (weeks)* (Weeks/Numeric) | 16 | | | |
| *1.2 Maternity Leave before childbirth (weeks)* (Weeks/Numeric) | | | | |
| *1.3 Maternity Leave for difficult pregnancy (weeks)* (Weeks/Numeric) | | | | |
| *1.4 Paternity Leave (weeks)* (Weeks/Numeric) | 2 | | | |
| *1.5 Adoption Leave (weeks)* (Weeks/Numeric) | 4 | | | |

***Eligibility***

**2 Is there a minimum period of employment required to be entitled to the parental leave benefit?** (Y or N)

*2.1 If yes, please provide the number of days required before maternity leave can be taken?* (Days/Numeric)

*2.2 If yes, please provide the number of days required before paternity leave can be taken* (Days/Numeric)

New questions are highlighted in green – please take note to provide your input in the respective plans

# BENEFIT SURVEY CYCLE 2018- JULY (Q3)

## KEY MILESTONE DATES

**Pre-survey meetings to introduce DCKs**

28th Mar 2018

**Data submission deadline**

27th Apr 2018

**Clarification of submissions by Mercer**

27th May 2018

**Data release date (BenefitsMonitor)**

27th Jul 2018

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# BENEFIT SURVEY CYCLE 2018

## LOCAL POINTS OF CONTACT

| | | |
|---|---|---|
| • Australia | Lydia Wright | Lydia.Wright@mercer.com |
| • Bangladesh | Arushi Ajay | Arushi.Ajay@mercer.com |
| • China | Sophia Guo | Sophia.Guo@mercer.com |
| • Hong Kong/Macau | Alanis Hon | Alanis.Hon@mercer.com |
| | Stephanie Law | Stephanie.Law@mercer.com |
| • India | Namita Bharadwaj | Namita.Bharadwaj@mercer.com |
| | Haritha Priyaadarshini T | Haritha.t@mercer.com |
| • Indonesia | Putri Patricia | Putri.patricia@mercer.com |
| • Japan | Soda Jumpei | Jumpei.soda@mercer.com |
| • Korea | Jewon Howang | Jewon.howang@mercer.com |
| • Malaysia | Kian Ann Lim | Kian.Ann.Lim@mercer.com |
| • Philippines | Michelle Malibago | Michelle.Malibago@mercer.com |
| • Pakistan | Syed Hassaan Sayeed | Syedhassaan.sayeed@abacus-global.com |
| • Singapore | Lois Tay | Lois.tay@mercer.com |
| • Sri Lanka | Sonali Sohani | sonali.sahani@mercer.com |
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| • Thailand | Thanthita Lertsurathitiporn | Thanthita.Lertsurathitiporn@mercer.com |
| • Vietnam | Phan Duy Thien | Phan.duy.thien@talentnet.vn |
| • Regional | Tan Hua Teck | HuaTeck.Tan@mercer.com |

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# WHAT'S NEW IN 2018?

SECTION-2

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# WHAT'S NEW IN 2018?

## DCK UPDATES – SOUTH KOREA

**NO NEW QUESTIONS ADDED IN 2018, ALL QUESTIONS REMAINS SAME AS PREVIOUS CYCLE**

# STRUCTURE OF QUESTIONNAIRE & INSTRUCTIONS TO FILL DCK

SECTION-3

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# STRUCTURE OF QUESTIONNAIRE AND INSTRUCTIONS TO FILL DCK

## INPUT INSTRUCTIONS

- Complete the survey as much as possible
  - If you have any doubts/questions on DCK, please contact the local Mercer representative
  - If you do not have a certain benefit do not leave blank, **please fill ‘ ⊗ ’**
  - If you have ‘grand-fathered plans’, do not fill them, provide **only** active plans
  - If you have multiple offerings for a benefit, please provide most common practice
  - If you have a range of amounts for a particular field, please provide the average amount
  - If there are %, fill in only the numerals
- All amounts are in local currency unless stated otherwise
- Do not use company name in comments
- Input only information for local hires and not expatriates or local plus hires

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# STRUCTURE OF QUESTIONNAIRE AND INSTRUCTIONS TO FILL DCK

## INPUT GUIDE

Input guides are shown in blue at the end of each question

| Input Guide | Details | Remarks |
|---|---|---|
| **Y or N** | Input Yes ✓ or No ⊗ when you answer to the questions such as asked whether the policy exists, choose items from the alternatives | ・Please ensure to answer to the questions particularly at the start of each section.<br>・Click once for ✓ = "Yes, and click twice for ⊗ = No |
| **Numeric** | Input numeric data such as the number of employees | ・Please do not enter 0（If there are no figure to input, please keep the column empty）<br>・Please do not input unit or comma. |
| **Local Currency** | Input the amount provided | ・Please input the amount in local currency<br>・Please do not enter 0（If there are no figure to input, please keep the column empty）<br>・Please do not input unit or comma. |
| **Fill %** | Input data that are necessary to show by percentage | ・Please do not enter 0（If there is no figure to input, please keep the column empty）<br>・Please do not input unit(%)<br>・Please do not divide the figure as a decimal（e.g. for 60% ：incorrect → 0.6; correct → 60） |
| **Any Response** | Input data that are not possible to input by "Y or N" or numeric such as Car model or additional comments. | ・If you do not have any comments, please leave it blank<br>・Limited to 250 characters. |

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# STRUCTURE OF QUESTIONNAIRE AND INSTRUCTIONS TO FILL DCK

## EMPLOYEES' CATEGORIES

- The  accommodates for five categories of employee levels:
  - Top Management
  - Management
  - Professional
  - Staff
  - Direct Labour
- Please see the definition of each category in the next page and the definition page of the DCK for reference

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# STRUCTURE OF QUESTIONNAIRE AND INSTRUCTIONS TO FILL DCK

## EMPLOYEES' CATEGORIES

| Employee Category | Definitions |
|---|---|
| **Top Management (Top Mgt)** | Employees with roles such as Head of Organization, Function Heads.<br>Head of organization – Has profit and loss responsibility for an entire business. Typically reports to Board of Directors or to a corporate head office.<br>Function head – The senior-most position in the company. These generally include top executives and directors within the company or employees with managerial responsibilities at the top level of a business unit or company. Executives are focused on defining strategy for the company. Typically report to the Head of organization. |
| **Management (Mgt)** | Employees with roles such as Sub-Function Head, and Functional Managers. Employees with important supervisory and managerial responsibilities, usually the higher levels within a business unit or company. Management-level employees focus on managing people and implementing policies and strategies to meet the company's objectives. Has managerial responsibility for a department or team. Combines both middle and senior management. Typically reports to an executive. |
| **Professionals (Prof)** | Works as a professional in a technical or professional sales or professional non-sales role. Professionals are typically individual contributors without supervisory responsibility, though may provide coaching/mentoring to less experienced staff. Typically holds a university degree or full-trade equivalent. Typically reports to a manager. Exempt staff including Specialists, Professional, or Technical staff who may be supervisors. |
| **Staff (Staff** | Non-Exempt staff, Support staff, or Customer Service Representative. Salaried employees typically in a business support, analyst, administrative or technical role. These are generally employees in a skilled, semi-skilled or unskilled roles without supervisory responsibility. Typically reports to a manager/ supervisor. This level does not require a university degree but may require formal professional training and certification.<br>i.e. Admin Staff, Secretary, Clerk, Engineer (entry) |
| **Direct Labor (Dir Lab)** | Non-exempt staff, typically in a manufacturing setting. Will include operators and technicians. |

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# GENERAL POINTS OF ATTENTION

SECTION-4

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# PERTAINING TO EMPLOYEE PLANS

## GENERAL POINTS OF ATTENTION

- If you have the same benefit policy across all employee categories, fill it up in one plan.

| | Plan 1 | Plan 2 |
|---|---|---|
| Top Management | ✓ | ○ |
| Management | ✓ | ○ |
| Professional | ✓ | ○ |
| Staff | ✓ | ○ |
| Direct Labour | ✓ | ○ |
| **Long Term Incentives** | | |
| 1 Does your organization provide a long term incentive plan? (Y or N) | ✓ | ○ |

- If you have different benefit policies for different employee categories, please split the employee categories into different plans

| | Plan 1 | Plan 2 |
|---|---|---|
| Top Management | ✓ | ○ |
| Management | ○ | ✓ |
| Professional | ○ | ✓ |
| Staff | ○ | ✓ |
| Direct Labour | ○ | ✓ |
| **Long Term Incentives** | | |
| 1 Does your organization provide a long term incentive plan? (Y or N) | ✓ | ⊗ |

Note: You do not need to have the same no. of plans for all benefits

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# DCK STRUCTURE

## GENERAL POINTS OF ATTENTION

- If you have multiple offerings for a benefit, please provide most common practice
- All amounts are in local currency unless stated otherwise (input guide will indicate)

There are 4 plans found in each section. For most benefits, that is sufficient

There are 5 employee categories depending on the country. It is broadly defined. Unlike Comp, there is no direct PC class correlation.

| | Plan 1 | Plan 2 | Plan 3 | Plan 4 |
|---|---|---|---|---|
| Top Management | ✓ | ○ | ○ | ○ |
| Management | ○ | ✓ | ○ | ○ |
| Professional | ○ | ✓ | ○ | ○ |
| Staff | ○ | ○ | ✓ | ○ |
| Direct Labour | ○ | ○ | ○ | ✓ |

Each question is accompanied by an input Guide. Take note of unit of measurement

**Employment Conditions**

| | Plan 1 | Plan 2 | Plan 3 | Plan 4 |
|---|---|---|---|---|
| **1 What is the number of working days per week in your organization?** (Days/Numeric) | 5 | 5 | 5 | 5 |
| **2 What is the number of working hours per day excluding lunch and tea breaks?** (Hours/Numeric) | 8 | 8 | 8 | 8 |
| **3 Do you have a probation period?** (Y or N) | ✓ | ✓ | ✓ | ✓ |
| *3.1 Duration of probation period in months:* (Months/Numeric) | 3 | 3 | 3 | 6 |
| **4 Resignation notice period, in weeks, required during probation period:** (Weeks/Numeric) | 4 | 4 | 2 | 2 |
| **5 Resignation notice period, in months, required after probation period:** (Months/Numeric) | 3 | 3 | 1 | 2 |

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# FLOW OF QUESTIONS

## GENERAL POINTS OF ATTENTION

**Loans**

**1 Do you provide loan benefits to your employees?** (Y or N)

Tier 1 Header

***Car Loan***

**2 Do you provide Car Loans?** (Y or N)

Tier 2 Header

**3 Is there a minimum service requirement?** (Y or N)

*3.1 If yes, please indicate the minimum number of months of service.* (Months/Numeric)

Details

**4 Car Loan Features**

*4.1 Maximum loan entitlement/amount (in local currency)* (Local Currency)

*4.2 Maximum loan entitlement (in number of months salary):* (Months/Numeric)

*4.3 Other formula used to determine maximum loan amount (please specify):* (Any Response)

*4.4 Loan is interest free.* (Y or N)

*4.5 Interest rate is at commercial loan rate.* (Y or N)

*4.6 Interest rate is subsidized.* (Y or N)

4.6.1 Subsidize at a fixed % (e.g. if your organization subsidize 5% interest rate no matter what the market rate is, please choose this option and select 5) (Fill %)

4.6.2 Subsidize a portion of the interest rate (e.g. if your organization pays 60% of the interest and employee pays 40%, please choose this option and report as 60) (Fill %)

4.6.3 Have the employee pay a fixed percentage (if market rate is 5% and you charge employees 2% of loan interest, choose this option and report as 2) (Fill %)

4.6.4 Other method of determining subsidy (specify method and amount): (Any Response)

*4.7 Maximum loan period/Tenure (years):* (Years/Numeric)

Ensure that 1st tier header questions get filled especially at start of sections.

These are 2nd tier header questions which begin at the start of subsections. These must be filled if your 1st tier header questions is a 'Y'.

If your 2nd tier header question is a 'Y', please fill in the details in all these sections. If it is a 'N', leave it blank

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# SPECIFIC POINTS OF ATTENTION

SECTION-5

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# Vehicle Benefits Section

# EMPLOYEE CATEGORIES USED FOR VEHICLE BENEFITS SECTION

## SPECIFIC POINTS OF ATTENTION

- **TOP MANAGEMENT**

| | |
|---|---|
| Non-Sales | Head of Organisation, Function Heads |
| Sales | Head of Sales/Marketing |

- **MANAGEMENT**

| | |
|---|---|
| Non-Sales | Senior Management/Sub-Function Heads, Management |
| Sales | Senior Sales/Marketing Management, Sales/Marketing Management |

- **PROFESSIONAL**

| | |
|---|---|
| Non-Sales | Professionals |
| Sales | Sales/Marketing Professionals |

- **STAFF**

| | |
|---|---|
| Non-Sales | Others, please specify |
| Sales | Customer Service Representatives |

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# VEHICLE BENEFIT

## SPECIFIC POINTS OF ATTENTION

Always ensure that all employee categories are separated eg. Plan 1 for Top Mgt etc.

| | Plan 1 | Plan 2 | Plan 3 | Plan 4 |
|---|---|---|---|---|
| Top Management | ○ | ○ | ○ | ○ |
| Management | ○ | ○ | ○ | ○ |
| Professional | ○ | ○ | ○ | ○ |
| Staff | ○ | ○ | ○ | ○ |
| Direct Labour | ○ | ○ | ○ | ○ |

Ensure Q1 is answered with either Y or N.

**Vehicle Non-Sales**

**1 Do you provide vehicle benefits (company car, car allowance, car plan, etc) to your employees?** (Y or N)

***Non Sales - Company Car***

**2 Do you provide a company car (either lease or company owned)?** (Y or N)

**3 Please specify who are eligible for company car for each plan:**

If Q1 is a Y, there needs to be an answer for "Do you provide a company car etc" and also "Do you provide a car allowance" as well as for the sub-questions.

*3.1 Head of organization (e.g. PC58 and above)* (Y or N)

*3.2 Function heads (e.g. PC58 and above)* (Y or N)

*3.3 Senior management/Sub-function heads (e.g. PC54-57)* (Y or N)

*3.4 Management (e.g. PC54-57)* (Y or N)

*3.5 Professionals (e.g. PC47-53)* (Y or N)

*3.6 Others; please specify:* (Any Response)

The respective positions can only be filled up in the following manner.

# VEHICLE BENEFIT

## SPECIFIC POINTS OF ATTENTION

| | Plan 1 | Plan 2 | Plan 3 | Plan 4 |
|---|---|---|---|---|
| Top Management | ○ | ○ | ○ | ○ |
| Management | ○ | ○ | ○ | ○ |
| Professional | ○ | ○ | ○ | ○ |
| Staff | ○ | ○ | ○ | ○ |
| Direct Labour | ○ | ○ | ○ | ○ |

**Vehicle Sales**

| | | | | |
|---|---|---|---|---|
| 1 Do you have sales employee in your current office? (Y or N) | ○ | ○ | ○ | ○ |
| 2 Do you provide vehicle benefits (company car, car allowance, etc) to your employees? (Y or N) | ○ | ○ | ○ | ○ |
| *Sales - Company Car* | | | | |
| 3 Do you provide a company car (either lease or company owned)? (Y or N) | ○ | ○ | ○ | ○ |
| 4 Please specify who are eligible for company car for each plan: | | | | |
| *4.1 Head of sales (e.g. PC58 and above)* (Y or N) | ○ | ○ | ○ | ○ |
| *4.2 Senior sales management (e.g. PC54-57)* (Y or N) | ○ | ○ | ○ | ○ |
| *4.3 Sales management (e.g. PC54-57)* (Y or N) | ○ | ○ | ○ | ○ |
| *4.4 Sales professional (e.g. PC47-53)* (Y or N) | ○ | ○ | ○ | ○ |
| *4.5 Customer service representatives (e.g. PC46 and below)* (Y or N) | ○ | ○ | ○ | ○ |
| *4.6 Others; please specify:* (Any Response) | | | | |

For vehicle benefits, there must be 4 different plans

If Q2 is Y, Qn 3 must be answered.

If Qn 3 is answered Y, then Qn 4 must be answered.

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# VEHICLE BENEFIT – SPLITTING THE PLANS

## SPECIFIC POINTS OF ATTENTION

| | Plan 1 | Plan 2 | Plan 3 | Plan 4 |
|---|---|---|---|---|
| Top Management | ✓ | ○ | ○ | ○ |
| Management | ✓ | ○ | ○ | ○ |
| Professional | ○ | ✓ | ○ | ○ |
| Staff | ○ | ✓ | ○ | ○ |
| Direct Labour | ○ | ○ | ○ | ○ |

**Vehicle Sales**

| | | | | |
|---|---|---|---|---|
| 1 Do you have sales employee in your current office? (Y or N) | ✓ | ✓ | | |
| 2 Do you provide vehicle benefits (company car, car allowance, etc) to your employees? (Y or N) | ✓ | ✓ | | |
| ***Sales - Company Car*** | | | | |
| 3 Do you provide a company car (either lease or company owned)? (Y or N) | ✓ | ✓ | | |
| 4 Please specify who are eligible for company car for each plan: | | | | |
| *4.1 Head of sales (e.g. PC58 and above)* (Y or N) | ✓ | ○ | | |
| *4.2 Senior sales management (e.g. PC54-57)* (Y or N) | ✓ | ○ | | |
| *4.3 Sales management (e.g. PC54-57)* (Y or N) | ✓ | | | |
| *4.4 Sales professional (e.g. PC47-53)* (Y or N) | ○ | ✓ | | |
| *4.5 Customer service representatives (e.g. PC46 and below)* (Y or N) | ○ | ✓ | | |
| *4.6 Others; please specify:* (Any Response) | | | | |

The position does not correspond. Plan needs to be split

# VEHICLE BENEFIT – RUNNING EXPENSES

## SPECIFIC POINTS OF ATTENTION

Running expenses do not include mileage claim. Mileage claim is under allowances section

Vehicle Benefits Section

**20 Which car running expenses are covered in addition to the fixed car allowance? (e.g. paid directly or reimbursed by company)**

*20.1 Registration* (Y or N)

*20.2 Parking (company car park)* (Y or N)

*20.3 Parking (business purposes)* (Y or N)

*20.4 Petrol/Fuel* (Y or N)

*20.5 Insurance* (Y or N)

*20.6 Maintenance & Repairs* (Y or N)

*20.7 Road toll costs (business purposes)* (Y or N)

*20.8 Road toll costs (non-business purposes)* (Y or N)

*20.9 Road Tax* (Y or N)

Allowances Section

**Mileage Claim Policy**

**10 Do you reimburse car mileage claims (for employees who are not eligible for car or car allowance)?** (Y or N)

*10.1 If yes, please specify the rate per kilometer:* (Numeric) 5

*10.2 If the mileage claim rate is different according to distance travelled, please specify:* (Any Response) 5

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# VEHICLE BENEFIT – RUNNING EXPENSES

## SPECIFIC POINTS OF ATTENTION

It is possible that some running car expenses components are included in car allowance while others are covered in addition to the car allowance. Indicate clearly.

**19 Which running car expenses are already included in the fixed car allowance?**

*19.1 Depreciation* (Y or N)

*19.2 Registration* (Y or N)

*19.3 Parking (company car park)* (Y or N)

*19.4 Parking (business purposes)* (Y or N)

*19.5 Petrol/Fuel* (Y or N)

*19.6 Insurance* (Y or N)

*19.7 Maintenance & Repairs* (Y or N)

*19.8 Road toll costs (business purposes)* (Y or N)

*19.9 Road toll costs (non-business purposes)* (Y or N)

*19.10 Road tax* (Y or N)

*19.11 Others; please specify:* (Any Response)

***Non Sales - Running Expenses on Top of Car Allowance***

**20 Which car running expenses are covered in addition to the fixed car allowance? (e.g. paid directly or reimbursed by company)**

*20.1 Registration* (Y or N)

*20.2 Parking (company car park)* (Y or N)

*20.3 Parking (business purposes)* (Y or N)

*20.4 Petrol/Fuel* (Y or N)

*20.5 Insurance* (Y or N)

*20.6 Maintenance & Repairs* (Y or N)

*20.7 Road toll costs (business purposes)* (Y or N)

*20.8 Road toll costs (non-business purposes)* (Y or N)

*20.9 Road Tax* (Y or N)

Indicate "Y" or "N" clearly:

components that are already **INCLUDED** in fixed car allowance

vs.

components that are covered **IN ADDITION** to fixed car allowance.

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# Other Benefits

# FLEXIBLE BENEFIT
## SPECIFIC POINTS OF ATTENTION

*2.3 Flex Dollars (also known as Flex Credits, Flex Points, Flexible Spending Account)* (Y or N)

2.3.1 Total amount of flex dollars/ points allocated per employee per year (Local Currency) — 11

2.3.2 Total amount of flex dollars/ points allocated per family per year (if applicable) (Local Currency) — 11

2.3.3 Estimated total cost of flex plan as % of total payroll (Fill %) — 11

Note that it is per employee per year

Total guaranteed cash

- If you have a flexible benefit, please continue to fill in the questions in the health benefit sections even though they may be covered in the flexible benefit section
- Please indicate in the comment section that it is under your flexible benefits programme where applicable

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# LOANS

## SPECIFIC POINTS OF ATTENTION

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Loans

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  - Defined Contribution
  - CIRSC

| | Plan 1 | Plan 2 | Plan 3 | Plan 4 |
|---|---|---|---|---|
| Top Management | ✓ | ○ | ○ | ○ |
| Management | ✓ | ○ | ○ | ○ |
| Professional | ✓ | ○ | ○ | |
| Staff | ✓ | ○ | ○ | ○ |
| Direct Labour | ✓ | ○ | ○ | ○ |

**Loans**

| | | | | |
|---|---|---|---|---|
| 1 Do you provide loan benefits to your employees? (Y or N) | ✓ | ○ | ○ | ○ |
| *Car Loan* | | | | |
| 2 Do you provide Car Loans? (Y or N) | ✓ | ○ | | |
| 3 Is there a minimum service requirement? (Y or N) | ✓ | ○ | ○ | ○ |
| *3.1 If yes, please indicate the minimum number of months of service.* (Months/Numeric) | 11 | | | |
| 4 Car Loan Features | | | | |
| *4.1 Maximum loan entitlement/amount (in local currency)* (Local Currency) | 11 | | | |
| *4.2 Maximum loan entitlement (in number of months salary):* (Months/Numeric) | | | | |
| *4.3 Other formula used to determine maximum loan amount (please specify):* (Any Response) | | | | |
| *4.4 Loan is interest free.* (Y or N) | ○ | ○ | ○ | ○ |
| *4.5 Interest rate is at commercial loan rate.* (Y or N) | ○ | ○ | ○ | |
| *4.6 Interest rate is subsidized.* (Y or N) | ✓ | ○ | | |
| 4.6.1 Subsidize at a fixed % (e.g. if your organization subsidize 5% interest rate no matter what the market rate is, please choose this option and select 5) (Fill %) | 11 | | | |
| 4.6.2 Subsidize a portion of the interest rate (e.g. if your organization pays 60% of the interest and employee pays | | | | |

Ensure Q1 is answered

If Q1 is Y, all the header questions for different loans need an answer

Options are mutually exclusive

This section is made of sub-sections featuring different loans. Ensure the 1st question of each sub-section is answered

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# LONG TERM INCENTIVES

## SPECIFIC POINTS OF ATTENTION

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  - Work Life Harmony - Others
- Annual Leave
  - Annual Leave
- Parental Leave
  - Maternity Leave
  - Paternity Leave
  - Adoption Leave
- Other Leave Types 2
  - Sick Leave
  - Unpaid Leave
  - Prolonged Medical Leave
  - Sabbatical Leave
  - Study / Exam Leave
  - Early Off on Traditional Festivals
  - Jury Leave
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  - Congratulations
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  - Defined Contribution
  - ORSO
- Retirement Defined Benefit

| | Plan 1 | Plan 2 | Plan 3 | Plan 4 |
|---|---|---|---|---|
| Top Management | ✓ | ○ | ○ | ○ |
| Management | ✓ | ○ | ○ | ○ |
| Professional | ○ | ✓ | ○ | ○ |
| Staff | ✓ | ○ | ○ | ○ |
| Direct Labour | ✓ | ○ | ○ | ○ |

**Long Term Incentives**

| | | | | |
|---|---|---|---|---|
| 1 Does your organization provide a long term incentive plan? (Y or N) | ✓ | ⊗ | ○ | ○ |
| *If no, please proceed to the next worksheet.* | | | | |
| ***Stock Purchase*** | | | | |
| 2 Do you provide Employee Stock Purchase Plan (ESPP)? (Y or N) | ✓ | ○ | ○ | ○ |
| 3 Eligibility | | | | |
| *3.1 Upon hire* (Y or N) | ○ | ○ | ○ | ○ |
| *3.2 After probation* (Y or N) | ○ | ○ | ○ | ○ |
| *3.3 Based on Performance* (Y or N) | ✓ | ○ | ○ | ○ |
| 3.3.1 If yes, is it based on corporate performance? (Y or N) | ○ | ○ | ○ | ○ |
| 3.3.2 If yes, is it based on individual performance? (Y or N) | ✓ | ○ | ○ | ○ |
| *3.4 Others; please specify:* (Any Response) | | | | |
| 4 How frequently can stock purchases be made? | | | | |
| *4.1 Annually* | ○ | ○ | ○ | |
| | ○ | ○ | | |
| *4.3 Quarterly* (Y or N) | ○ | ○ | ○ | ○ |
| *4.4 Upon hiring* (Y or N) | ○ | ○ | ○ | ○ |
| *4.5 Discretionary/no policy* (Y or N) | ○ | ○ | ○ | ○ |
| *4.6 Others; please specify:* (Any Response) | 11 | | | |

Plan 2: Please answer at least one sub question.

If Q1 is N, leave rest of section blank. If it is Y, Please answer respective sub sections.

Options are mutually exclusive..\

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# MAKE TOMORROW, TODAY

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