



香港復康會  
The Hong Kong Society  
for Rehabilitation

職位編號:

Position Ref. No.:

(只供內部使用 For internal use only)

## 職位申請表 Position Application Form

相片  
Photo

### 申請人須知及收集個人資料聲明:

#### Notes to Applicant and Personal Information Collection Statement:

- 應徵者必須填寫本表格內**所有**部分，否則申請或不獲受理。  
Applicants must fill in **ALL** parts of this application form, otherwise, incomplete application may not be considered by the Society.
- 本會將要求應徵者出示證明文件，以供核對其申報之學歷、工作及薪酬等。  
Applicants will be required to produce documentary evidence concerning their qualifications, work experience, remuneration, etc. as declared in this application form for verification.
- 應徵者所提供之資料將用作招聘及其他僱用有關的事宜，並只供其他授權處理有關事宜之人士閱覽。  
The information provided will be used for recruitment and other employment related purposes and will be given to other relevant authorized persons.
- 本會會保留應徵者於職位申請表所提供的資料十二個月。當本會的其他部門有合適空缺時，閣下的個人資料可能會被轉交至有關部門以考慮閣下的職位申請。此後，閣下的個人資料將會被銷毀。  
It is our policy to retain the personal data of unsuccessful applications for a period of twelve months from the date of rejecting applicants for the purpose of future recruitment. Thereafter, your application together with all material you provided will be destroyed.
- 根據《個人資料(私隱)條例》的規定，資料當事人有權查閱及更正本會持有其個人的資料。本會或會在提供有關資料前收取費用。如欲查閱或更改本會所持有閣下的個人資料，請郵寄至九龍藍田復康徑 7 號 1 樓香港復康會人力資源部收或電郵至 [hksr\\_recruit@rehab society.org.hk](mailto:hksr_recruit@rehab society.org.hk)。  
Under the Personal Data (Privacy) Ordinance, you have the right to request access to, and/or correction of your personal data in relation to your application. We may charge you a fee before you can access the information. If you wish to do so, please write to Human Resources Department, The Hong Kong Society for Rehabilitation, 1/F, HKSAR Lam Tin Complex, 7 Rehab Path, Lam Tin, Kowloon or email to [hksr\\_recruit@rehab society.org.hk](mailto:hksr_recruit@rehab society.org.hk).

申請職位

Position Applied for

部門/單位

Department / Unit

### 個人資料 Personal Particulars

英文姓名(須與香港身份證相同)(姓氏先行)

English Name in Full (as on HKID card) (Surname first)

中文姓名(須與香港身份證相同)

Chinese Name (as on HKID card)

#香港身份證/護照號碼

#HKID Card / Passport No.

性別

Sex

出生日期

Date of Birth

出生地點

Place of Birth

聯絡電話

(住所)

Contact Phone No. (Home)

(手提電話)

(Mobile)

(電郵)

(E-mail)

住址

Residential Address

### 學歷及專業訓練 (請按日期由新至舊列出)

#### Education & Professional Training (Please list out the information in reverse chronological order)

由 (月/年) From (MM/YY)	至 (月/年) To (MM/YY)	院校/機構 Schools/Institutions	畢業班級/所獲資格或學歷 Classes Attended / Qualifications Obtained

工作經驗 (請按日期由新至舊列出)

Working Experience (Please list out the information in reverse chronological order)

由 (月/年) From (MM/YY)	至 (月/年) To (MM/YY)	受僱機構 Name of Employer	職位 Position Held	*全職 *Full-time	*兼職 *Part-time	職責 Duties
				<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	

專業資格 (請按日期由新至舊列出)

Professional Qualifications / Memberships (Please list out the information in reverse chronological order)

頒發日期 Date of Award	專業團體 Professional Body	所獲專業資格 Qualification/Membership Obtained

其他資料 Other Information

請詳列與此應徵職位有關之其他專長 (如電腦知識、通曉語言、中英文打字速度等)：

Please state any other relevant skills which will support your application (e.g. computer skills, language proficiency, Chinese and English typing speed, etc.):

諮詢人 Referees

請提供能就你的工作能力及品格給予意見的前僱主或有關教育及專業機構之資料。

Please state your ex-employer or any educational/professional institute(s) who can comment on your capabilities and conduct.

姓名 Name	關係 Relationship	職銜 Position	工作機構 Name of Organization	電郵地址 Email Address	聯絡電話 Contact Phone No.

## 其他 Others

1. ☐ 本人從未受聘於香港復康會。  
I have never been employed by The Hong Kong Society for Rehabilitation.  
☐ 本人是香港復康會現職僱員。(如是，不用填寫第二題)  
I am a serving employee of The Hong Kong Society for Rehabilitation. (If yes, no need to answer Q2)  
☐ 本人是香港復康會前僱員。  
I am a former employee of The Hong Kong Society for Rehabilitation.
2. 本人 I ☐ 沒有親屬或任何認識的人現職於香港復康會。  
do not have relative(s) or anyone whom I know currently employed by The Hong Kong Society for Rehabilitation.  
有親屬或任何認識的人現職於香港復康會，請列明：  
☐ have relative(s) or anyone whom I know currently employed by The Hong Kong Society for Rehabilitation, please specify:

姓名 Name \_\_\_\_\_ 職位 Position \_\_\_\_\_ 關係 Relationship \_\_\_\_\_

3. a. 現職／近職基本月薪  
Present / Last Basic Monthly Salary 港幣 HK\$ \_\_\_\_\_ 每月 Per Month x \_\_\_\_\_ 月 Months  
b. 花紅、佣金、酬金或其他津貼  
Bonus, commission, gratuity or other allowance 港幣 HK\$ \_\_\_\_\_ 或 or 基本月薪的 \_\_\_\_\_ 百分比 % of Basic Monthly Salary

4. 要求待遇  
Expected Salary \_\_\_\_\_
5. 可到任日期  
Date Available \_\_\_\_\_

6. 本人從 #報章/互聯網/親友/其他媒介 (請註明: \_\_\_\_\_) 得悉貴會的空缺。如介紹人是本會現職僱員，請列明：  
The above vacant position is heard about from # newspaper / internet / relatives & friends / other media. (Please specify: \_\_\_\_\_)  
If the referee is a serving employee of the Hong Kong Society for Rehabilitation, please specify:

姓名 Name \_\_\_\_\_ 職位 Position \_\_\_\_\_ 關係 Relationship \_\_\_\_\_

## 聲明 Declaration

本人謹此聲明本人沒有任何犯罪紀錄(包括性罪行)，及以上所提供之資料、所附履歷表及相關文件均屬真實並為完整，並同意提供有關本人身份、資歷、薪酬及其他相關文件之正本予貴會查核。本人明白倘若故意虛報資料或隱瞞任何相關資料，香港復康會可取消已發出之口頭或書面聘約，或縱使本人已獲聘任仍會被解僱而無需給予任何補償。

I declare that I have not committed any crimes (including sexual crime) and the information given above, my curriculum vitae and relevant documents as attached are correct and completed to the best of my knowledge. I agree to produce the originals of all identification, qualification, remuneration and other relevant documents as required by the Society for verification. I understand that if I knowingly supply false information or withhold any relevant information, The Hong Kong Society for Rehabilitation has the right to rescind any verbal/written offer of appointment and I shall render myself liable to dismissal without compensation if I am eventually appointed by the Society.

簽署  
Signature \_\_\_\_\_

日期  
Date \_\_\_\_\_