



# LAM TAI FAI COLLEGE

# 林大輝中學

25 Ngan Shing Street, Shatin, NT  
Tel: (852) 2786 1990 Fax: (852) 2786 9617

CONFIDENTIAL

## APPLICATION FORM

POST APPLIED FOR: \_\_\_\_\_

REFERENCE NO.: \_\_\_\_\_

PLEASE FILL IN THE FORM IN BLOCK LETTERS

PERSONAL PARTICULAR									
NAME		(In English)			(In Chinese)				
PARTICULARS		<input type="checkbox"/> Hong Kong ID:							
		<input type="checkbox"/> Passport No.:			Place of Issue:				
		Date of Birth:		(DD)	(MM)	(YY)	Place of Birth:		
		<input type="checkbox"/> Male	<input type="checkbox"/> Female	Nationality:			Religion:		
HOME ADDRESS									
CONTACT NO.		(Home)			(Mobile)				
E-MAIL ADDRESS									
REGISTERED TEACHER REFERENCE NO.									
EDUCATION (e.g. BA, BSc, etc.)									
DATE		INSTITUTE	QUALIFICATION	MAJOR					
FROM	TO								
HKCEE <input type="checkbox"/> / HKDSE <input type="checkbox"/>									
SUBJECT	ENG	CHIN	MATHS						
YEAR									
RESULT									
HKALE									
SUBJECT	ENG	CHIN							
YEAR									
RESULT									

PROFESSIONAL QUALIFICATIONS (e.g. PGDE, Associateship, Certificates, etc.)			
DATE		INSTITUTE	QUALIFICATION
FROM	TO		

TEACHING / WORKING EXPERIENCE				
DATE		EMPLOYER	POSITION	LAST SALARY (hour/month)
FROM	TO			

EXTRA-CURRICULAR ACTIVITIES / OTHER EXPERIENCE

COMPUTER SKILLS / KNOWLEDGE OF SOFTWARE

LANGUAGES PROFICIENCY				
ENGLISH	<input type="checkbox"/> GOOD	<input type="checkbox"/> AVERAGE	<input type="checkbox"/> BASIC	QUALIFICATION:
CANTONESE	<input type="checkbox"/> GOOD	<input type="checkbox"/> AVERAGE	<input type="checkbox"/> BASIC	QUALIFICATION:
PUTONGHUA	<input type="checkbox"/> GOOD	<input type="checkbox"/> AVERAGE	<input type="checkbox"/> BASIC	QUALIFICATION:

REFEREES			
NAME	POSITION	ORGANIZATION	CONTACT NO.

**DECLARATION**

1. Have you ever been convicted of a criminal offence in Hong Kong or elsewhere?

No       Yes      If yes, please give details.

2. Are you involved in any ongoing criminal proceedings or investigations (including but not limited to arrest or apprehension by the police) to the best of your knowledge?

No       Yes      If yes, please give details.

3. Have you ever had any civil judgments made against you?

No       Yes      If yes, please give details.

4. Have your registered teacher or permitted teacher status ever been cancelled / refused?

No       Yes      If yes, please give details.

I do not have teacher registration nor permitted teacher status.

5. To the best of your knowledge, have you ever been investigated by school(s) or the EDB over professional misconduct allegations,?

No       Yes      If yes, please give details.

**AUTHORISATION**

**Important – Please read carefully, sign and date.**

I confirm that the information I have given is correct to the best of my knowledge and belief.

Permission is hereby given to LAM TAI FAI COLLEGE, to carry out such searches as may be necessary, including searches of consumer credit records, in order to verify the information presented in this application form.

By signing below I agree that LAM TAI FAI COLLEGE may use any data collected or generated from other schools, process or store such data in any appropriate format within the personnel department.

I understand that my records will continue to be handled in accordance with the personal data (privacy) ordinance.

I understand that all information will be kept confidential. I understand that the provision of inaccurate information and/or the results of such reference checks may result in the delay of my employment commencing with LAM TAI FAI COLLEGE or my offer of employment being withdrawn.

I consent to LAM TAI FAI COLLEGE making of any necessary enquiries for purposes relating to recruitment by and employment with LAM TAI FAI COLLEGE and for the verification of the information given above. I authorize my current and/or previous employer(s) to release any record or information as may be required for these enquiries.

I consent to the application by LAM TAI FAI COLLEGE to the EDB for releasing information regarding my registration / permitted teacher status.

I understand and accept that if I provide false information or withhold material information, I am subject to the dire consequences of criminal prosecution, and I may be dismissed by LAM TAI FAI COLLEGE.

I understand and accept the above terms and statements.

CURRENT SALARY: \_\_\_\_\_

EXPECTED SALARY: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_