



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 (Teaching Staff)

POST APPLIED FOR: _____ REFERENCE NO.: _____

PLEASE FILL IN THE FORM IN BLOCK LETTERS

I. PERSONAL PARTICULAR									
NAME		(In English)				(In Chinese)			
PARTICULARS		<input type="checkbox"/> Hong Kong ID / 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					TEACHER REGISTRATION NO.				
II. EDUCATION									
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									

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

IV. TEACHING / WORKING EXPERIENCE				
DATE		EMPLOYER	POSITION	LAST SALARY
FROM	TO			

V. EXTRA-CURRICULAR ACTIVITIES / OTHER EXPERIENCE

VI. COMPUTER SKILLS / KNOWLEDGE OF SOFTWARE

VII. 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:

VIII. REFEREES			
NAME	POSITION	ORGANIZATION	CONTACT NO.

IX. DECLARATION

1. 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.

2. To the best of your knowledge, have you ever been issued reprimand/warning/advisory letter by EDB due to your professional misconduct?

No Yes If yes, please give details.

3. 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.

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

No Yes If yes, please give details.

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

No Yes If yes, please give details.

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

No Yes If yes, please give details.

X. 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 (“the 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 the 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 the COLLEGE or my offer of employment being withdrawn.

I consent to the COLLEGE making any necessary enquiries for purposes relating to recruitment by and employment with the 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 the COLLEGE to the EDB for releasing information regarding my registration / permitted teacher status.

I understand that my application together with all materials I provided will be destroyed after six months from the date of the application deadline.

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 the COLLEGE.

I understand and accept the above terms and statements.

CURRENT SALARY: _____

EXPECTED SALARY: _____

APPLICANT’S SIGNATURE: _____

DATE: _____