

## Transport and Logistics Training Board 運輸及物流業訓練委員會

Secretariat: 30/F, Billion Plaza II, 10 Cheung Yue Street, Cheung Sha Wan, Kowloon

秘書處: 九龍長沙灣長裕街 10 號億京廣場 2 期 30 樓 Enquiry 查詢電話: 3907 6871 Fax 圖文傳真: 3748 9400

## 申請發還部份學費表格 Application for Partial Reimbursement of Course Fee Form

課程名稱 Course/Programme Name:							
E別 Class: VTC 參考編號 VTC Ref. Prefix 19 :							
主辦單位名稱 Name of Organiser:							
修讀期 Duration:	至 to	Ę	學費 Course fee: 港幣\$ 元				元
英文姓名 Mr/Mrs/Miss/Ms:				_			
中文姓名:	先生/女士	香港身份證號碼	HKID No.:				
公司名稱 Name of firm:							
公司電話 Telephone of work place:		圖文	傳真 Fax:				
公司地址 Address of firm:							
職位及所屬部門/組別 Position and Depart	rtment/Section:						
住址 Home address:							
電郵 Email address:							
其他聯絡電話 Other contact telephone:							
發還學費申請 Application For Refund of 請在適當空格內填上「✓」號 Please t □ 學費由公司支付。請將有關款項發過 □ 學費由參加者自付。請將有關款項發本部分由申請人的僱主填寫 The following	tick or put 'X' in the app 覆予公司。Fees paid by 發還予參加者。Self-fi	y company and refun nancing and refund it					
茲證明上述申請人現為本公司僱員,其負currently an employee of the company and h				y that the	above	applic	cant is
推薦人員 Recommending Officer:							
職銜及所屬部門 Title and department:							
日期 Date:			公司 Employer's cho	印鑑及認 op with au			ıture
本人聲明在此報名表所提供的資料完整真 this application form are accurate and I cons							
日期 Date:	申請人簽署 Si	gnature of applicant	:				

運輸及物流業訓練委員會所批核課程。每一項課程須用一張申請表。參加者必須達到課程的評核要求,方可獲得指定退款。不論自費或公費報讀均須有僱主證明。申請人於同一課程可獲得其他公帑資助本申請則無效。職業訓練局保留權利,接受或拒絕申請。This form is to be used for endorsed courses of the Transport and Logistics Training Board. Please use separate form for each application and ensure that all columns of the form are completed. The granting of reimbursement is subject to satisfactory completion of the course according to course requirements. Employer's certification is required irrespective of whether the applicant is self-financing or company financed. The application is considered void if the applicant is eligible for other public-funded reimbursement of the course fee. The Vocational Training Council reserves the right to accept or reject any application.

## **Declaration Letter**

l <u>,                                      </u>	(name according to HKID card) declare that all inform	mation
provided in th	ne Application Form for Partial Reimbursement of	Course Fee
(VTC) is true,	complete and accurate.	
	d that I have not been granted/applied any other fubsidy or financial assistance for the	
•	(Course name) (Course code:	)
	(Class date).	
	Name:	
	Signature with company chop:	
	Date:	