

SAMPLE ONLY



Transport Logistics Training Board

物流貨運業訓練委員會

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 6663 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 : Dangerous Good Regulation

班別 Class : DG04-HF04Y VTC 參考編號 VTC Ref. Prefix 16 : (Leave it blank)

主辦單位名稱 Name of Organizer : HAFFA

修讀期 Duration : 11 Apr 2016 至 to 15 Apr 2016 學費 Course fee : 港幣\$ 3500 元

英文姓名 (Mr/Mrs/Miss/Ms) : Chan Tai Man

中文姓名 : 陳大文 (先生) 女士 香港身份證號碼 HKID No. : A

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公司名稱 Name of firm : ABC Logistics (HK) Ltd

公司電話 Telephone of work place : 2123 4567 圖文傳真 Fax : 2123 8765

公司地址 Address of firm : 1/F, ABC Centre, 12-14 CDE Street, TST, Kln, HK

職位及所屬部門/組別 Position and Department/Section : Operation

住址 Home address : 6/F, Block 4, ABC Garden, 1 XYZ Street, Cheung Sha Wan, Kln, HK

電郵 e mail address : Taimanchan@abclogistics.com

其他聯絡電話 Other contact telephone : 9234 5678

發還學費申請 Application For Refund of Course Fee

請在適當空格內填上「✓」號 Please tick or put 'X' in the appropriate box

- 學費由公司支付。請將有關款項發還予公司。 Fees paid by company and refund if any to be made to the company
- 學費由參加者自付。請將有關款項發還予參加者。 Self-financing and refund if any to be made to the participant

本部分由申請人的僱主填寫 The following to be completed by applicant's employer :

茲證明上述申請人現為本公司僱員，其負責的職務與所報讀的課程內容有關。 This is to certify that the above applicant is currently an employee of the company and his/her duty is related to the course that he/she attends.

推薦人員 Recommending Officer : Wong Siu Wing

職銜及所屬部門 Title and department : Director / Airfreight Operation

日期 Date : 10 Mar 2016



本人聲明在此報名表所提供的資料完整真確，並同意可按照貴局個人資料政策作有關用途。 I declare that the data I filled in this application form are accurate and I consent that the data can be used in accordance with the Council's policy on personal data.

日期 Date : 10 Mar 2016 申請人簽署 Signature of applicant : [Signature]

物流貨運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 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

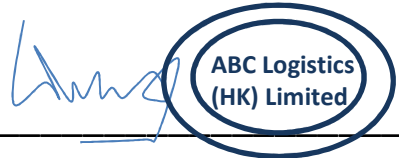
I, Chan Tai Man (name according to HKID card) declare that all information provided in the Application Form for Partial Reimbursement of Course Fee (VTC) is true, complete and accurate.

I also declare that I have not been granted/applied any other form of government subsidy or financial assistance for the Dangerous Good Regulation course (Course name) (Course code: DG04-HF04Y) dated on 11-15 Apr 2016 (Class date).

Enclosed please find the OCC reimbursement form for your kind handling.

Name: Chan Tai Man

Signature with company chop: _____



Date: 10 Mar 2016