

立法會秘書處 — 職位申請表格

Legislative Council Secretariat — Application Form for Employment

備註 Points to note :

1. 本表格所收集的資料，將用作與招聘有關的目的。有關立法會秘書處處理個人資料政策的詳情，請登入立法會網頁(www.legco.gov.hk)閱覽。
Information collected in this form will be used for recruitment-related purposes. Please refer to the Legislative Council website (www.legco.gov.hk) for details about the Legislative Council Secretariat's policies in relation to the handling of personal data.
2. 請將填妥的表格寄達香港中區立法會道 1 號立法會綜合大樓立法會秘書處人力資源組，並請在信封面上註明申請職位的名稱。
Please send the completed form to Human Resources Office, Legislative Council Secretariat, Legislative Council Complex, 1 Legislative Council Road, Central, Hong Kong. Please also indicate the post applied for on the envelope.
3. 請勿郵寄學歷證明書及就業紀錄副本。在進行招聘程序期間，秘書處在有需要時會要求申請者出示有關資料正本作核實。
Please do not send any copies of academic certificates and employment records. Applicants may be required to produce originals for verification during the recruitment process.
4. 若要求索閱或更改立法會秘書處備存的個人資料，應致函香港中區立法會道 1 號立法會綜合大樓立法會秘書處人力資源組高級議會秘書(申訴及資源管理)7。
Request for access to or correction of personal data held by the Legislative Council Secretariat should be made in writing to Senior Council Secretary (Complaints and Resources Management) 7, Human Resources Office, Legislative Council Secretariat, Legislative Council Complex, 1 Legislative Council Road, Central, Hong Kong.
5. 未獲取錄者的資料通常會在招聘工作完成後 12 個月內銷毀。
Information on unsuccessful candidates will normally be destroyed 12 months after completion of the recruitment exercise.

申請職位名稱

Position applied for : _____

請註明從何得知此職位

Please indicate how you know about this position: _____

I. 個人資料 Personal particulars

英文姓名 (以香港身分證或護照所載者為準) Name in English (as stated on HKID card or passport)	稱謂 Title <input type="checkbox"/> 先生 Mr <input type="checkbox"/> 太太 Mrs <input type="checkbox"/> 女士 Ms <input type="checkbox"/> 小姐 Miss
中文姓名 Name in Chinese	日間聯絡電話 Daytime contact telephone no.
出生年份 Year of birth	流動電話 Mobile no.
香港特別行政區永久性居民 Hong Kong Special Administrative Region permanent resident <input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No	電郵地址 E-mail address
住址(英文) Residential address (in English)	
通訊地址(如與住址不同) Correspondence address (if different from residential address)	

II. 學歷 (以倒序列出) Academic attainment (in reverse chronological order)

- 申請人如未能按招聘廣告內列出的入職要求提供所有資料，申請書將不獲受理。
Your application will not be considered if you fail to provide all information requested in the recruitment advertisement.
- 如申請表格空位不敷填寫，申請人應另頁詳列有關資料，隨申請表格附上。
If there is insufficient space in the form, please give details on a separate sheet to be attached to the application form.

(1) 公開考試成績 Public examination results

(請詳細列出已獲取的公開考試成績。)(Please provide details of the public examination results obtained.)

頒發日期 (月/年) Date issued (M/Y)	頒發機構 (例如：香港考試及評核局) Issuing authority (e.g. Hong Kong Examinations and Assessment Authority)	公開考試 (例如：香港中學文憑考試、 香港中學會考) Public examination (e.g. Hong Kong Diploma of Secondary Education Examination, Hong Kong Certificate of Education Examination)	及格科目及成績 (例如：中國語文(第2級)、英國語文(課程乙)(C)) Subject(s) passed and level attained (e.g. Chin. Lang. (Level 2), Eng. Lang. (Syl. B) (C))

(請在適當方格內加上"✓"號。)
(Please insert a "✓" in the appropriate box.)

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(2) 就學詳情 Education

由(月/年) From (M/Y)	至(月/年) To (M/Y)	曾經/現正就讀的學校、學院或大學等 Schools, colleges or universities, etc. attended/attending	就讀的班級/課程及已獲取/將獲取的學歷 (例如：中一至中六；副社會科學學士； 榮譽文學士-二級榮譽甲等(主修：地理、副修：歷史)) Class/programmes attended/attending and qualification obtained/to be obtained (e.g. Secondary 1 - 6; Associate of Social Science; Bachelor of Arts (Honours) - Second Class Div I (Major: Geography, Minor: History))	上課方式 (例如：全日制/ 兼讀制) Mode of attendance (e.g. Full-time/ Part-time)

(3) 公開考試中取得的最佳成績 Best results obtained in public examinations

(如你未曾參加以下任何一項公開考試，請把方格留空。)

(If you have not attended any of the examination(s) below, please leave the box(es) blank.)

(a) 中文科最佳成績 Best result(s) in Chinese Language subject	(請於方格內填寫等級，例如：A, B, 第 5 級, 第 4 級等) (Please specify the grading, e.g. A, B, Level 5, Level 4 etc. in the box(es))
(i) 香港中學文憑考試 Hong Kong Diploma of Secondary Education Examination	
(ii) 香港中學會考 Hong Kong Certificate of Education Examination	
(iii) 香港高級程度會考 (高級程度/高級補充程度) Hong Kong Advanced Level Examination (A-level/AS-level)	
(b) 英文科最佳成績 Best result(s) in English Language subject	
(i) 香港中學文憑考試 Hong Kong Diploma of Secondary Education Examination	
(ii) 香港中學會考 Hong Kong Certificate of Education Examination (<input type="checkbox"/> 英國語文 English Language/ <input type="checkbox"/> 英國語文(課程乙) English Language (Syllabus B)/ <input type="checkbox"/> 英國語文(課程甲) English Language (Syllabus A))	
(iii) 香港高級程度會考 (高級程度/高級補充程度) Hong Kong Advanced Level Examination (A-level/AS-level)	

(4) 綜合招聘考試 (由公務員事務局舉辦) Common Recruitment Examination (conducted by the Civil Service Bureau)

(如你未曾參加綜合招聘考試，請把方格留空。)(If you have not attended the Common Recruitment Examination, please leave the box(es) blank.)

(a) 中文運用 Use of Chinese	<input type="checkbox"/> 一級 Level 1 / <input type="checkbox"/> 二級 Level 2
(b) 英文運用 Use of English	<input type="checkbox"/> 一級 Level 1 / <input type="checkbox"/> 二級 Level 2
(c) 能力傾向測試 Aptitude Test	<input type="checkbox"/> 及格 Pass

(請在適當方格內加上"✓"號。)

(Please insert a "✓" in the appropriate box.)

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III. 工作經驗 (以倒序列出) Work experience (in reverse chronological order)

- 申請人如未能按招聘廣告內列出的入職要求提供所有資料，申請書將不獲受理。
Your application will not be considered if you fail to provide all information requested in the recruitment advertisement.
- 如申請表格空位不敷填寫，申請人應另頁詳列有關資料，隨申請表格附上。
If there is insufficient space in the form, please give details on a separate sheet to be attached to the application form.

由(月/年) From (M/Y)	至(月/年) To (M/Y)	年期 Years	僱主名稱 Name of employer	職位 Position held	工作性質 Nature of work	月薪 Monthly salary	全職/兼職 Full-time/ Part-time
全職工作年數(例如：6年3月) Total full-time employment (e.g. 6 years 3 months):							
向現時僱主離職所需給予的通知期 Notice period required by present employer:							
如獲聘任，最早可上任的日期 Earliest date available if appointed:							

IV. 專業資格 (以倒序列出) Professional qualifications (in reverse chronological order)

頒授/將頒授日期(月/年) Date obtained/ to be obtained (M/Y)	專業機構名稱 Name of professional institution	持有的專業資格 Professional qualification	已達到/將達到的程度 Level attained/to be attained

V. 其他專業或職業訓練 (以倒序列出) Other professional or occupational training (in reverse chronological order)

由(月/年) From (M/Y)	至(月/年) To (M/Y)	機構名稱 Name of institution	訓練性質 Nature of training

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VI. 義務工作 (以倒序列出)(可選擇是否填寫) Voluntary service (in reverse chronological order)(Optional)

由(月/年) From (M/Y)	至(月/年) To (M/Y)	機構名稱 Name of organization/agency	職位 Position held

VII. 其他額外有關資料 Other additional relevant information**VIII. 可選擇是否填寫 Optional**

如為殘疾人士，請註明在參加考試/面試時，是否需要特別的安排。

For a candidate with a disability, please specify whether you need special arrangement for taking the examination/attending an interview.

考試 Examination 是 Yes 否 No 如需特別考試安排，請列明有關要求 If yes, please specify the arrangement required for examination

面試 Interview 是 Yes 否 No 如需特別面試安排，請列明有關要求 If yes, please specify the arrangement required for interview

請註明殘疾性質及程度

Please indicate nature and degree of disability

請註明是否需獲得為殘疾人士而設的優先聘用程序

Please indicate if you wish to make use of the preferential appointment procedure applicable to candidates with disabilities 是 Yes 否 No

(備註：殘疾人士與其他申請人獲同等看待。申請人如需獲得為殘疾人士而設的優先聘用程序，或須就所患殘疾提交醫生證明。有關優先聘用程序的詳情，請登入立法會網頁(www.legco.gov.hk)閱覽。)

(Note: Candidates with disabilities are treated equally with other applicants. Medical proof of their disabilities may be required if candidates wish to make use of the preferential appointment procedure applicable to candidates with disabilities. Please refer to the Legislative Council website (www.legco.gov.hk) for details about the preferential appointment procedure.)

IX. 聲明及同意接受與僱傭事宜有關的查核 Declaration and consent for employment-related checkings

(A) 謹此聲明，本人據所知及所理解填寫上述資料，一切資料均屬真確無訛。本人明白若虛報或隱瞞重要事實，可令本人喪失獲立法會行政管理委員會錄用的資格；即使已獲立法會行政管理委員會錄用，亦可遭終止聘用。

I declare that the information given above is correct and is completed to the best of my knowledge and belief. I understand that if I give any false information or withhold any material information, I shall render myself liable to disqualification for employment by The Legislative Council Commission or termination of employment, if already employed by The Legislative Council Commission.

(B) 謹此亦聲明，本人同意向為本人進行所需職前身體檢查的醫生提供本人在上文就所患殘疾填寫的資料。(如適用)

I also declare that I consent to the release of the information provided above in relation to my disability to the medical practitioner conducting the requisite pre-employment medical examination on me. (where applicable)

(C) 本人同意立法會秘書處可就進一步處理本人的職位申請事宜(例如：僱主推薦、操守審查、體格檢查等)及為核實上述資料而進行必要的查詢。本人授權所有政府部門及其他組織或機構可就這些查詢，透露任何有關的紀錄及資料。

I consent to the Legislative Council Secretariat making any necessary enquiries to further process my application (e.g. employer reference, integrity checking and medical examination, etc.) and for the verification of the information given above. I authorize all government departments and other organizations or agencies to release any record or information as may be required for these enquiries.

本人明白，進行上述資料查詢程序並不表示秘書處已決定聘用本人擔任申請的職位。

I understand that the above processes do not carry any implication as to appointment to the said post.

簽署 Signature: _____ 姓名 Name: _____ 日期 Date: _____

(請在適當方格內加上"✓"號。)

(Please insert a "✓" in the appropriate box.)

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