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| Former CCLU/ LIFE Student Only 若曾是社區學院或本學院學生，請填寫此欄 |
| Student No.: 學生編號: |
| (For Official Use Only 學院專用) Received Form on: |
| Banner on: |

Application Form 報名表格

Certificate of Health Advisor 診所顧問專業證書課程

Please read the Programme Brochure before completing this form. Please complete the form in English **BLOCK LETTERS** and with a black / blue pen.

填寫前請細閱課程簡介及報名須知，並以英文正楷及使用黑色/藍色原子筆填寫。

Please choose the course title of your preferences 請選擇科目名稱:

(1) Basic Class 初階班 ☐ (2) Advanced Class 深造班 ☐ (3) Basic & Advanced Class 初階及深造班 ☐

Tuition Fee: (1) Basic Class 初階班 \$3,200 (total 18 hours 共18小時)
學費: (2) Advanced Class 深造班 \$8,800 (total 44 hours 共44小時, include 32 hours practicum 含32 小時實習)
(3) Basic & Advanced Class 初階及深造班 \$10,800

Course Location: Tsim Sha Tsui
上課地點: 尖沙咀

1) Personal Particulars 個人資料 (As stated on HKID Card/ Passport 以香港身份證/ 護照所載為準)

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|------------------------------------|--|-------------------------|----------------------|
| Title 稱謂 | *Mr 先生 / Miss 小姐 (*Please delete as appropriate 請刪去不適用選項) | Name in Chinese 中文姓名 | <input type="text"/> |
| Name (Surname first) 英文姓名(姓氏先行) | <input type="text"/> | | |
| HK ID Card 香港身份證號碼 | <input type="text"/> (<input type="text"/>) | Date of Birth 出生日期 | <input type="text"/> |
| Nationality 國籍 | <input type="text"/> | Passport No. 護照號碼 | <input type="text"/> |
| Correspondence Address 通訊地址 | <input type="text"/> | | |
| Tel. No. (Home) 住宅電話 | <input type="text"/> | Mobile Phone 手提電話 | <input type="text"/> |
| Email 電郵地址 | <input type="text"/> | | |

2) Academic Qualifications 學歷及專業資格

a.) Academic and Professional Qualifications 學歷及專業資格

| From MM/YYYY 由 月/年 | To MM/YYYY 至 月/年 | Issuing Institution 頒授機構名稱 | Academic / Professional Qualifications 學歷/ 專業資格 | Date of Issue 頒授日期 |
|-----------------------|---------------------|-------------------------------|--|-----------------------|
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b.) Highest education level achieved 最高學歷程度

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|---------------------------------|--------------------------|--|--------------------------|---|--------------------------|
| Primary or below 小學或以下程度 | <input type="checkbox"/> | Matriculation or equivalent 預科或同等程度 | <input type="checkbox"/> | Postgraduate Diploma/Certificate 深造文憑/證書 | <input type="checkbox"/> |
| Lower Secondary 初中 | <input type="checkbox"/> | Sub-degree 非學位文憑/證書 | <input type="checkbox"/> | Master's Degree 碩士 | <input type="checkbox"/> |
| Form 5 or equivalent 中五或同等程度 | <input type="checkbox"/> | Bachelor's Degree 學士學位 | <input type="checkbox"/> | Doctoral Degree 博士 | <input type="checkbox"/> |

3) Working Experience 工作經驗

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|-----------------|--------------------------|-----------------|--------------------------|--------------------------------------|--------------------------|------------------|--------------------------|-------------------------|--------------------------|
| Full-time 全職 | <input type="checkbox"/> | Part-time 兼職 | <input type="checkbox"/> | Student / Further Studies 學生 / 進修 | <input type="checkbox"/> | Unemployed 待業 | <input type="checkbox"/> | Retired Persons 退休人士 | <input type="checkbox"/> |
|-----------------|--------------------------|-----------------|--------------------------|--------------------------------------|--------------------------|------------------|--------------------------|-------------------------|--------------------------|

4) How did you learn about the course Information? 閣下從何處獲悉本學院課程資料?

(You may choose more than one option 可作多項選擇)

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|---|---|--|--|--|
| <input type="checkbox"/> www.ln.edu.hk/life 學院網頁 | <input type="checkbox"/> Newspaper/Magazine Advertisement 報章/雜誌廣告 | <input type="checkbox"/> Referrals by teachers/relatives 師長/親屬推介 | <input type="checkbox"/> Referrals by teachers/relatives 同學/朋友推介 | <input type="checkbox"/> Other, please specify 其他, 請註明: _____ |
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如申請人不欲收到本學院之推廣電郵或最新課程資訊, 請填上 "✓"。

If Applicant would not like to receive our promotional e-mail or latest course information, please put a "✓".

5) Enrolment 報名方法

Applicants may enrol in person with the following items at any of our education centres or send to "Lingnan Institute of Further Education, 215A, New Academic Block, Lingnan University, Tuen Mun, N.T.", specifying "Course Application" before the deadline. Post-dated cheque is not accepted. Please write the applicant's name, HKID card no. and course title on the back of the cheque.

申請人須備妥以下文件連同報名表格於截止日期前親身交回本院各教育中心或郵寄(請於信封面上註明「課程申請」)致新界屯門嶺南大學新教學大樓215A室。本學院恕不接受期票; 請在支票/銀行本票背面寫上申請人姓名、香港身分證號碼及課程名稱。

(1) Duly completed enrolment form 已填妥之報名表格

(2) Copy of HKID Card / Passport 香港身份證或護照副本

(3) Tuition fee (Please make crossed cheque payable to "Lingnan University") 學費(銀行本票/劃線支票抬頭:「嶺南大學」)

6) Declaration 聲明

4.1) I declare that all information given in this form are true and correct to the best of my knowledge, and I understand that provision of any false and misleading information will lead to disqualification of my application for admission and registration.

本人謹此聲明, 此表格內所填報及所提供的資料, 均屬真實無訛。如有任何虛報或誤導資料, 則本人的申請及註冊資格均會被取消。

4.2) I authorize Lingnan Institute of Further Education (LIFE) to use my personal data for processing my application form admission. I understand that such personal information will become part of the student record and for academic, administrative, student activities, alumni management, research, statistical and marketing purposes. I understand that the personal data collected can be handled by the staff of LIFE, The Community College at Lingnan University and Lingnan University. In all such circumstances data will be treated in strict confidential. I understand that the personal data collected will not be disclosed to third parties other than those specified without my express approval, or unless required by law. I understand that the application form and other related personal information may be retained after admission exercise for statistical and research purposes.

本人授權嶺南大學持續進修學院(學院)使用本申請表內有關的個人資料, 作處理入學之用。本人明白, 若獲得學院取錄, 本人資料將會轉為學生紀錄, 並會用於教學、行政、學生活動、舊生會、研究、統計、市場分析及課程推廣事宜上。本人明白學院、嶺南大學社區學院及嶺南大學的職員有權處理有關個人資料, 而一切資料將會保密。本人明白除了因應法律要求下, 學院不會未經申請人的同意以任何方式公開顯示可資識別個人身份之資料。本人明白本人的申請表及有關文件可能會於收生程序完結後被保留作統計及研究用途。

I have read, understood and agreed the above mentioned "Declaration".

本人已閱讀、明白及同意上述"聲明"。

4.3) Applicants have the right to request access to and correction of the personal data under the Personal Data (Privacy) Ordinance. For such requests, please submit your written requests to Lifelong Learning Programmes Division (215A, New Academic Block, Lingnan University, Tuen Mun, N.T.).

根據個人資料(私隱)條例, 申請人有權要求查閱及更改個人資料。如有需要, 請向持續進修課程部(新界屯門嶺南大學新教學大樓215A室)提出書面要求。

4.4) I consent that if registered in LIFE, I will conform to the Regulations of LIFE.

本人同意如本人註冊入學, 當遵守嶺南大學持續進修學院的規則。

4.5) I understand that fees paid are neither refundable nor transferable regardless of whether students have attended classes or not.

本人明白不論上課與否, 所有已繳學費概不退還。

4.6) I understand that admission to the course(s) is subject to final approval of LIFE.

本人明白嶺南大學持續進修學院保留取錄學生的最終的決定權。

4.7) I understand that LIFE reserves the right to offer the course(s) or concentration(s) or not without prior notice.

本人明白嶺南大學持續進修學院保留課程最終的開辦權而無須作出事前通知。

Signature 簽署 _____

Date 日期 _____

215A, New Academic Block, Lingnan University, Tuen Mun, N.T. 新界屯門嶺南大學新教學大樓215A室

Contact No. 聯絡電話: 2616 7255

Office Hour: Mon - Fri 9:00am - 1:00pm, 2:00pm - 5:30pm 辦公時間: 星期一至五早上九時至下午一時, 下午二時至五時半