



香港大學畢業同學會教育基金

Hong Kong University Graduates Association Education Foundation

香港黃竹坑南風道9號 9 Nam Fung Road, Wong Chuk Hang, Hong Kong
電話 Telephone: (852) 2870 8815 傳真 Fax: (852) 2870 8825 電郵 Email: info@hkuga-ef.org.hk 網址 Website: www.hkuga-ef.org.hk

APPLICATION FORM FOR ASSOCIATE MEMBERSHIP 附屬會員申請表

Please fill in this form in BLOCK LETTERS for computer processing.
All data will be treated in strict confidence and for internal use only.
請以正楷填寫下列表格，以便將資料輸入電腦。所有資料絕對保密，僅供內部使用。

Please ☐ the appropriate box(es) 請在適當方格內加上✓ 號

I would like to apply as Associate Member of the Foundation and attach cheque for the payment of*:

本人欲申請為基金附屬會員並附上支票支付會費*:

☐ **HK\$500** (Entrance Fee 入會費 HK\$1,000 + Annual Subscription Fee 年費\$500)

☐ **HK\$250** (Entrance Fee 入會費 HK\$1,000 + Half-year Subscription Fee 半年年費\$250)

* Annual subscription for each Associate Member is due on 1 January in each calendar year. Those admitted on or before 30 June pay the full subscription (\$500), while those admitted on or after 1 July pay half of that amount (\$250) for the first year.

* 年費每年1月1日起計算。6月30日或之前加入須付足全年年費 (HK\$500); 7月1日或之後加入者首年付半年年費 (HK\$250)。

I. Personal Details 個人資料

Title* 稱謂*	☐ Dr. 博士 ☐ Mrs. 太太	☐ Professor 教授 ☐ Miss 小姐	☐ Mr. 先生 ☐ Ms. 女士
Name (English)* 姓名(英文)* (As on HKID Card) (與香港身份証上的姓名相同)			Name (Chinese) 姓名(中文)
Gender 性別	☐ Male 男 ☐ Female 女	Age Range 年齡	☐ 18 to 24 ☐ 25 to 34 ☐ 35 to 44 ☐ 45 to 54 ☐ 55 to 64 ☐ 65 or over
Mobile* 流動電話*			HKID No.: (first 4 digits)
E-mail Address* 電郵地址*	(Complete this so that the Foundation may regularly disseminate news or information to you) (您可透過電郵定期收到基金的資訊或活動資料)		
Correspondence Address in English* 通訊地址(英文)*			

II. Occupation 職業

Your Current Status* 現職狀況*	☐ Self-employed 自僱 ☐ Employed 受僱 ☐ Retired 退休
Industry/Nature of Business/ Faculty/ Department* 行業／業務性質／學院／部門*	
Name of Organization (Current/ Last) 任職機構（現職／前任職）	
Post (Current/ Last) 職位（現職／前任職）	

III. Qualifications 學歷

Highest Degree Attained* 最高學歷*	
Name Of Institution 大學／學院名稱 _____	Graduation Year 畢業年份 _____
☐ Others, please specify 其他，請註明: _____	

IV. Knowledge and Expectation of the Foundation 對基金的認識

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V. Linkage with Other Educational Organizations 與其他機構的聯繫

Please list 1 to 3 organizations which you have close links with, e.g., an active member, a Board director/ committee member, or a donor/sponsor.

請列出 1-3 間與您有較多緊密聯繫的機構，例如：活躍會員、董事／理事，或捐助者／贊助者。

1.
2.
3.

VI. Other Information 其他資料

■ Are you a member of Hong Kong University Graduates Association (HKUGA)? 您是否香港大學畢業同學會的會員？ ☐ YES 是 ☐ NO 否 If yes, please specify: ☐ Life Member 永久會員 ☐ Ordinary Member 普通會員 如為該會會員，請註明：
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■ Are you a member of Hong Kong University Alumni Association (HKUAA)? 您是否香港大學校友會的會員? ☐ YES 是 ☐ NO 否
■ Is/Are your son(s) /daughter(s) student(s) of HKUGA College/Primary School? 您的子女是否曾／正就讀於港大同學會書院或港大同學會小學? ☐ YES 是 ☐ NO 否 If yes, please specify: ☐ HKUGA College 港大同學會書院 如曾就讀，請註明： Class level 年級 _____ Years of attendance 就讀年份 _____ ☐ HKUGA Primary School 港大同學會小學 Class level 年級 _____ Years of attendance 就讀年份 _____
■ What kinds of activities do you want to participate in or in which fields are you interested to help the development of the Foundation? (You may select more than one field) 您有興趣參與哪些活動／協助基金發展的範疇？(可選擇多於一項) ☐ Education forums/Seminars/Conferences 教育研討會／講座／會議 ☐ Membership Development 會員發展 ☐ Support School Development 支援學校發展 ☐ Promotion/Publication 宣傳／出版 ☐ Fund-raising activities 籌款活動 ☐ Others, please specify 其他，請註明: _____

VII. Referrers' Information 推薦人資料

This section to be completed by two Members of the Foundation.
此部份需由兩位提名人填寫，他們必須是教育基金的會員。

1	Proposer's Name (English) 提名人姓名 (英文)	Mobile Phone No. 流動電話號碼
	Relationship with the Applicant 與申請人之關係	
	I have known the applicant for ____ years, and I believe he/she would be a suitable person to be an Associate Member of the Foundation. 本人與申請人已認識 ____ 年，並相信他/她為教育基金附屬會員之合適人選。	
	Please provide as much information about the nominee as possible. 請提供有關被提名人的資料。	
	Signature 簽署	Date 日期
2	Proposer's Name (English) 提名人姓名 (英文)	Mobile Phone No. 流動電話號碼
	Relationship with the Applicant 與申請人之關係	
	I have known the applicant for ____ years, and I believe he/she would be a suitable person to be an Associate Member of the Foundation. 本人與申請人已認識 ____ 年，並相信他/她為教育基金附屬會員之合適人選。	
	Please provide as much information about the nominee as possible. 請提供有關被提名人的資料。	
	Signature 簽署	Date 日期

• I declare that the information provided on the application form is true and correct to the best of my knowledge and belief. 本人謹此聲明於申請表上所填寫的各項資料均屬正確無誤。 • I acknowledge and confirm that I have read and understood the "Personal Information Collection Statement". 本人確認已閱讀並明白收集「個人資料收集聲明」。			
Signature 簽名：		Date 日期：	

Office Use Only

Checklist	Date
☐ Application Form & Payment Received	
☐ Arrange Interview with the Applicant	
☐ Approved/Declined by MEP sub-committee at regular MEP meetings	
☐ Issue confirmation letter signed by Executive Director with a copy of "Rights and Benefits of Associate Member" together with the official receipt	

Hong Kong University Graduates Association Education Foundation

Personal Information Collection Statement

To comply with the new requirements of the Personal Data (Privacy) Ordinance which have been in effect since 1st April, 2013, Hong Kong University Graduates Association Education Foundation (the Foundation) undertakes to comply with the requirements of the Ordinance to ensure accurate and secure keeping of your personal data.

Purpose of Collection and Guideline for Use of Personal Data

The Foundation has been using your personal data for the purposes of organizational updates, including providing information about our quarterly enews, fundraising appeals, issuing receipts, event invitations and other communication and marketing purposes. The Foundation will continue to use your contact information (including name, telephone and fax numbers, email and postal addresses, etc) and other relevant information for the above purposes.

You may opt out of receiving communications from the Foundation, as mentioned above, at any time, by sending a letter or email to us. The Foundation will not sell, rent, or transfer your personal data to any person or organization.

Access to and Correction of Personal Data and Request for cessation of using Personal Data for Promotion Purposes

Apart from the exemptions provided under the Personal Data (Privacy) Ordinance, you are entitled to access and correct your personal data held by the Foundation, and request us to cease to use your personal data for promotion purposes. However, it will not include the personal data deleted after the achievement of the purpose. To do so, you should make a written request to the following:

Hong Kong University Graduates Association Education Foundation

Address: 9 Nam Fung Road, Wong Chuk Hang, Hong Kong

Tel: (852) 2240 6913/ 2240 6902

Fax: (852) 2870 8825

Email: info@hkuga-ef.org.hk

For enquiries, please contact the Secretariat of the Foundation at 2240 6913/ 2240 6902.

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個人資料使用守則收集聲明

個人資料私隱專員公署《2012 年個人資料(私隱)條例》(條例)已作出了多項修訂，並已於 2013 年 4 月 1 日起正式實施。香港大學畢業同學會教育基金 (下稱「本基金」) 已確保條例中所列載的規定，已準確無誤及妥善儲存閣下的個人資料。

收集資料的目的及使用準則 本基金向來不定時發放訊息，讓閣下了解本基金的活動及近況消息，包括每季出版的電子報、活動推廣邀請、本會資訊、籌募、各項收據、招募會員及收集意見等。本基金將繼續使用閣下提供給本基金的通訊資料 (如姓名、電話及傳真號碼、電郵及郵寄地址等) 及其他相關資料聯繫作上述用途。

如反對本基金將閣下的個人資料作全部或部份上述用途，請以書面或電郵 (info@hkuga-ef.org.hk) 通知本基金。除作上述用途之外，本基金不會以任何形式出售、租借及轉讓閣下的資料予任何人士或組織。

查閱及更新個人資料及申請停止使用個人資料作推廣之用途 除了《個人資料 (私隱) 條例》規定的豁免範圍之外，閣下有權就本基金備存有關閣下的個人資料提出查閱、更改及停止使用你的個人資料作推廣之用途的要求，但已達成使用的目的後而刪除的個人資料除外。上述要求應以書面提出，詳情如下：

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地址：香港黃竹坑南風道九號
電話：(852) 2240 6913/ 2240 6902
傳真：(852) 2870 8825
電郵： info@hkuga-ef.org.hk

如有任何查詢，請與本基金秘書處同事聯絡(電話: 2240 6913/ 2240 6902)。