

續期註冊申請表 Renewal Application Form

此表只供一位申請者使用
This form is for one applicant's use only.

致: 香港 筲箕灣
南安街 83 號
海安商業中心 27 樓
社會工作者註冊局
註冊主任

To: Registrar
Social Workers Registration Board
27/F, Eastern Commercial Centre
83 Nam On Street
Shau Kei Wan
Hong Kong

傳真 Fax : 2591 1411
電郵地址 Email address: info@swrb.org.hk

(請於適當方格內填上“—”號 Please tick “—” as appropriate)

- (1) 本人 會 / 不會 申請續期註冊。
I wish / do not wish to apply for renewal.

(*不申請續期現有註冊的原因 Reason for not to renew current registration: _____)

- (2) 本人的個人資料、工作職位及學歷並無變更。
There is no change in my Personal Particulars, employment and qualifications.
- 請根據背頁的個人資料更改通知所示的變更，更新本人的紀錄。
Please update my record in accordance with the changes as stipulated in the attached **Notification of Changes in Personal Particulars Form overleaf**.

- (3) 本人確認現時本人的社會工作職位詳情如下：
I confirm the details of my present Social Work Employment as follows:

職位/職級 Post/Rank: _____ 僱用機構 Employing Agency: _____
入職日期 Commencement Date: _____

- (4) 本人現應要求附上下列文件以供處理：
As requested, I enclose herewith the following documents for your processing:

- (a) 控罪及定罪通知書（如適用）
Notification of Charges and Convictions (if appropriate)
- (b) 由本人僱主提供的社會工作職位任職證明
Letter of Certification on my present Social Work Employment issued by my employing agency
- (c) 修讀認可課程計劃書
Proposal on Obtaining Recognized Social Work Qualification
- (d) 其他文件 Other documents (請列明 Please specify: _____)

- (5) 本人欲透過以下方式繳付為數四百元的續期費：
I would like to effect the payment of my renewal fee of \$400 by:

- 夾附的支票(抬頭請寫「社會工作者註冊局」,並請於支票背面清楚寫上閣下的姓名及註冊編號。期票概不接受。)
cheque which is enclosed. (Please make your cheque payable to “**Social Workers Registration Board**” and print your **name** and **registration number** clearly at the back of the cheque. Post-dated cheque would not be accepted.)
- 繳費靈 (請輸入五位數字的賬戶號碼,即閣下的註冊號碼。註冊局的商戶編號為「9329」。)
PPS (Please enter a 5-digit bill account number, i.e. your registration number. The merchant code of the Board is “9329”.)
- 其他 Others (請列明 Please specify: _____)

- (6) 本人擬以下列方式收取續期註冊通知書(必須任擇其一):
I wish to receive the letter of notification on renewal of registration (one option only):

by ordinary mail 郵寄 by email 電郵傳遞 (電郵地址 Email address: _____)

(如註冊局收不到閣下的選擇,將繼續以郵寄方式寄出續期註冊通知書。If there is no indication of your decision, the Board will continue sending the letter of notification on renewal of registration to you by ordinary mail.)

(註: 註冊局只能處理以指明表格提出及已繳付有關費用的續期申請。)

(Note: The Board can only process an application for renewal made in the specified form with the prescribed fee paid.)

姓名 Name: _____ 註冊編號 Registration No.: _____

簽署 Signature: _____ 日期 Date: _____

請轉後頁 P.T.O.

個人資料更改通知
Notification of Changes in Personal Particulars

根據《社會工作者註冊條例》第 16(3)條，註冊社工須在其個人資料更改後的 3 個月內，通知註冊主任。因此，請填妥下表，通知註冊局任何有關已變更的資料。

In accordance with the Section 16(3) of the Social Workers Registration Ordinance, all registered social workers should within 3 months notify the Registrar of any change in personal particulars. Therefore, please inform the Board of any changes using the form below.

致： 香港 筲箕灣
南安街 83 號
海安商業中心 27 樓
社會工作者註冊局
註冊主任

To: Registrar
Social Workers Registration Board
27/F, Eastern Commercial Centre
83 Nam On Street
Shau Kei Wan
Hong Kong

傳真 Fax : 2591 1411

電郵地址 Email address: info@swrb.org.hk

請只填報有變更處 Please put in changes only

A. 個人資料 Personal Particulars

住址電話 Home Phone No. : _____ 辦公室電話 Office Phone No.: _____

手提電話 Mobile Phone No.: _____ 傳真號碼 Fax No. : _____

*電郵地址 Email address: _____ 傳呼機號碼 Pager No. : _____

註冊地址 Address to be appeared on the Register: _____

(亦作通訊地址 also correspondence address) _____

B. 社會工作職位 Social Work Employment

現職僱主 Current Employer: _____

現時職位 Current Rank: _____ 現職履任日期 Start Date: _____

C. 社會工作學歷 Social Work Qualification

[請提供證明文件(畢業證書副本) Please provide supporting document (a copy of Certificate)]

學歷 Qualification : _____ 頒授年份 Year of Award : _____

學院名稱 Name of Institution: _____ 國家 Country: _____

*電郵地址只用作傳遞非機密的資訊，註冊局不會透過電郵向註冊社工索取個人資料。

The email address is for disseminating non-confidential information only. The Board will not collect personal particulars from registered social workers by email.

姓名 Name: _____ 註冊編號 Registration No.: _____

簽署 Signature: _____ 日期 Date: _____

*根據個人資料(私隱)條例，閣下可要求查閱或更改在本表格內或以其他方法提供的個人資料。請以書面向社會工作者註冊局註冊主任提出該等要求。註冊局建議閣下保留此已填妥表格的副本，以備參考。

In accordance with the provisions of the Personal Data (Privacy) Ordinance, you may request for access to or correction of the personal data provided in this form or by other means. Such requests may be made in writing to the Registrar, Social Workers Registration Board. You are advised to keep a copy of this completed form for reference.