

Part-time Teachers Application Form

For Official Use Only:
College:
Subject:
Teacher No
ID card seen by:

兼職教師職位申請表		Teacher No.		
	ルルルイン 日 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 	ID card seen by:		
. Please complete this form in BLOCK LET you wish, attach a full curriculum vitae.	TER and in full to provide basic information in	a standard format. You may, if		
請以正階填寫。 閣下亦可附上履歷一份	• 0			
teachers database. It may also be disclosed	all appropriate purposes within the School and r d to parties authorized to process the informatio for consideration of other suitable vacancy(ies). e months.	n for appointment or it may be		
申請人所提供的資料將予保密,並只供有	申請人所提供的資料將予保密,並只供有關人員或部門作招聘用途 。申請表格將於12個月後銷毀。			
to Teacher Support Team, Registry Affairs Road, Cheung Sha Wan, Kowloon.	sent to the Teacher Support Team by email to <u>t</u> Unit, HKU SPACE, Unit A5, 10/F, NCB Innov hku.hk 或郵寄九龍長沙灣荔枝角道888號南商 組」收。	ration Centre, 888 Lai Chi Kok		
Post Applied for 申請職位	Reference No. 空缺編號	:		
Programme / Subject 課程/學科				
Part 1 Personal Particulars 個人資料	I			
*Title: □ Prof. □ Dr. □ Mr. □ Mr. □ 無調 教授 博士 先生		ese:applicable 如適用)		
Surname姓氏:	Given Name(s)名字 (in full):			
Date of Birth 出生日期 (optional 非必要):				
HKID No. 香港身份證號碼 :				
	 發國家(for applicants without HKID 適用於	沙右禾进自,炒蒸的由洼 1)。		
assport ivo. & Country of Issue 最黑加河及	交叉多(for applicants without HKID 地市)	汉有首 <i>他</i> 岁历起时中萌八)		
7				
Correspondence Address 通訊地址				
	Contact Tel. No. 聯絡電話:			
Tax No. 傳具號疇 (II any):	E-mail Address 電郵地址:	<u> </u>		
Please tick as appropriate 請於適當空格加✓號	Full Name of Applicant 由語人今夕			

Full Name of Applicant 申請人全名 _

Part 2 Qualifications (please provide details in descending chronological order) 資歷 (請順序列出)

Academic Qualifications 學歷

Award Institution 頒授院校名稱	Qualifications and Subjects 所得資格/文憑/學位 及 修讀範圍	Year of Award 頒授年份

Professional Membership 專業資格 (if applicable 如適用)

Name of Professional Body 學會/專業機構名稱	Name of Award 認可程度/資格	Year of Award 頒授年份

Current and Recent Teaching/Working Experience 工作及教學經驗

Dates 日期 (Month/year)		Organisation	Position
		Organisation	
From \boxplus	To 至	工作機構/僱主名稱	職位

Language (Medium of Instruction) 可	操教學語言	
Please specify 請註明		

Other Subject(s) Applicant wants to Teach 台端	,希望任教之其他科目
Please specify 請註明	
Other School Appointments 其他於本院之職位	
/ Member of Programme Review Panel of HKU SPACE	Examiner / Academic Assessor / Member of Programme Validation Pane / 課程評審小組成員 / 課程檢討小組成員, 請註明。
* please delete as appropriate 請刪除不適用者	
Other Relevant Information 其他資料	
Declaration on Conflict of Interest 聲明	
	in the School, please give their names in full and state their relationship in law, brothers/sisters and their spouses, children and their spouses.
如台端有親友於本院工作,請提供其姓名及與其之 偶、子女及其配偶。	Z關係。 直系親屬包括配偶、個人或配偶之父母、兄弟姊妹及其配
I, the applicant , certify that the information I have given	n is correct and complete to the best of my knowledge.
本人為申請人,謹此證明提供之所有資料為事實之金	è部,並無虛言。
Signature 簽署:	Date 日期:

Full Name of Applicant 申請人全名 _____