



香港中文大學 — 東華三院社區書院  
The Chinese University of Hong Kong –  
Tung Wah Group of Hospitals Community College



職位編號  
Ref. No.

兼任老師職位應徵表格  
APPLICATION FORM FOR PART-TIME TEACHING POSITIONS

備註:	<ol style="list-style-type: none"> <li>請將填妥之應徵表格，交回香港九龍何文田衛理道 31 號 17 樓香港中文大學—東華三院社區書院人事部收。信封面請註明「應徵—機密」及有關職位編號。</li> <li>書院將於選聘期間要求應徵者出示有關第 II, III, IV 及 V 部份所申報之學歷證書及工作經驗證明文件以供核對。</li> <li>應徵者所提供之資料將用作招聘或其他與僱傭有關事宜，並會供書院有關部門、委員會或其他處理招聘事宜之人士查閱。招聘程序完成後，未獲取錄之應徵者資料，當無須保留時將全部銷毀。</li> </ol>
Notes:	<ol style="list-style-type: none"> <li>The completed application form, should be returned to the Human Resources Office, The Chinese University of Hong Kong – Tung Wah Group of Hospitals Community College, 17/F., 31 Wylie Road, Homantin, Kowloon, Hong Kong. Please mark “Application – Confidential” and the relevant reference number on the cover.</li> <li>Applicants will be required to produce documentary evidence pertaining to the qualifications and working experience (where appropriate) in Sections II, III, IV &amp; V for verification in due course.</li> <li>The information provided will be used for appointment and other employment-related purposes in the College. It may be accessible to offices, committees or persons who will process appointment matters. Information on all unsuccessful candidates will be destroyed when no longer required after the recruitment exercise.</li> </ol>

應徵職位 Position Applied for	學院/部門 School/Department
------------------------------	----------------------------

I. 個人資料 Personal Particulars

英文姓名 (姓氏先行) Name in full (English) (Surname first)			中文姓名 Name (Chinese)	
稱謂 Title 請選擇 Please select one	香港身份證／護照號碼 H. K. I.D. Card / Passport No. 請選擇 Please select one	國籍 Nationality	出生日期 (D/M/Y) Date of Birth	出生地點 Place of Birth
聯絡電話 (住所) Contact Phone No. (Home)	(辦公室) (Office)	(手提電話) (Mobile)	(電郵) (E-mail)	
通訊地址 Correspondence Address				
住址 (如與上址不同) Residential Address (if different from above)				

II. 學歷 (請倒序列出，即最近者最先敘述) Academic Qualifications (in reverse chronological order)

院校 Institutes	主修 Major	副修 Minor	Dates 日期		證書 / 文憑 / 學位 Cert / Dip / Degrees	頒授日期 Dates Awarded
			From 由	To 至		

III. 教學經驗 (請倒序排列，即最近者最先敘述) Teaching Experience (in reverse chronological order)

院校 Schools / Colleges / Institutes	職位 Positions Held	全職 / 兼職 Full-time / Part-time	Dates 日期		薪酬(每月) Salaries (per month)*	離職原因 Reasons of Leaving (T= Termination; C=Contract End; R=Resignation; RD=Redundancy)
			From 由	To 至		

**IV. 工作經驗 (教學經驗除外) (請倒序排列, 即最近者最先敘述) Experience Other than Teaching (in reverse chronological order)**

服務機構/僱主 Organizations/ Employers	職位 Positions Held	全職 / 兼職 Full-time / Part-time	Dates 日期		薪酬(每月) Salaries (per month)*	離職原因 Reasons of Leaving (T= Termination; C=Contract End; R=Resignation RD=Redundancy)
			From 由	To 至		

(如不敷應用, 請另紙書寫。 You may provide the particulars on a separate sheet of paper if there is insufficient space.)

\* Please specify bonus and other benefits, if any.

**V. 專業資格 (請倒序列出, 即最近者最先敘述) Professional Qualifications / Memberships (in reverse chronological order)**

專業團體 (全名) Professional Bodies (Full Name)	所獲專業資格 Qualifications / Memberships Obtained	獲取途徑 (如考試、推選等) Channels of Award (e.g. exam., election)	頒發日期 Dates of Award

**VI. 其他資料 Other Information**

請詳列與此應徵職位有關的資料

Please provide any other relevant information in support of your application.

**VII. 申請任教科目 Subject(s) You Intend to Teach**

1. _____	4. _____						
2. _____	5. _____						
3. _____	6. _____						
可任教日及時間 Days & times available	(請在適適用格內填上“√”號) (please put a “√” in appropriate box (es))						
	Mon	Tue	Wed	Thu	Fri	Sat	Sun
8:30 am-1:30 pm							
1:30 pm-6:30 pm							
6:30 pm-10:30 pm							

**VIII. 其他 Others**

請問從何處得悉本職位空缺?

How did you learn about this vacancy?

**IX. 聲明 Declaration**

本人謹此聲明以上所提供的資料均屬真實, 如獲聘任, 本人將提供有關身份及資歷文件的正本予書院查核。本人明白倘若故意虛報資料或隱瞞重要事實, 香港中文大學 – 東華三院社區書院可取消已發出的口頭或書面聘約或縱使已獲聘任亦可遭解僱。

I declare that the information given above is correct and complete to the best of my knowledge. I will produce the original copies of all identification and qualification documents as required by the College upon assumption of duty at the College if appointed. I understand that if I knowingly supply false information or withhold any material information, The Chinese University of Hong Kong – Tung Wah Group of Hospitals Community College shall have the right to rescind any verbal / written offer of appointment and I shall render myself liable to dismissal if I am eventually appointed by the College.

日期  
Date

簽署  
Signature

\_\_\_\_\_

\_\_\_\_\_