

RESIDENTIAL CARE HOMES (ELDERLY PERSONS) REGULATION

Application for Registration as a Health Worker

full face
photograph of
applicant to be
affixed here

Attention :

In accordance with Section 5 of the Residential Care Homes (Elderly Persons) Regulation, the Social Welfare Department has established and maintained the Register of Health Workers for inspection by the public free of charge. All persons included in this Register are persons registered as health workers according to Section 6(2) of the Regulation for the purposes of employment at a residential care home. Any person who collects the personal data of the health workers as included in this Register for direct marketing purposes may contravene the use limitation requirement of Principle 3 in Schedule 1 of the Personal Data (Privacy) Ordinance. Complaints by health workers for such purpose can be addressed to the Office of the Privacy Commissioner for Personal Data.

Enquiry : 2961 7221 or
2961 7264

Application form should be sent to :

Licensing Office of
Residential Care Homes for the Elderly,
Social Welfare Department,
Room 2354, 23/F, Wu Chung House,
213 Queen's Road East,
Wan Chai, Hong Kong

Applicant's correspondence address :

Daytime Contact Phone No.: _____

1. I forward the following particulars of myself and request you to include me in your Register of Health Workers under Regulation 6(1) of the Residential Care Homes (Elderly Persons) Regulation.

2. Particulars :

(a) Name (Mr/Mrs/Miss/Ms)*

(in English)

(in block letters)

(in Chinese)

(b) Aliases _____

*Delete as appropriate

(c) Date of birth _____

(d) Nationality _____

(e) Hong Kong Identity Card Number _____

(f) Residential address

(g) Telephone number _____

(h) Education in detail

Name of Schools and Universities	Date of Entry (month/year)	Date of Leaving (month/year)	Highest Class/Form Completed	Certificate/ Diploma/Degree Achieved (copies to be attached)	Official Use

(i) Relevant training on care for elders attended : (including details of the course, date of attendance, certificate obtained and attaching a copy of the certificate showing the completion of the course)

(j) Details of experience (this refers to working experience in residential care homes for the elderly)

Name of Home	Post Held	Date of Commencement (month/year)	Date of Leaving (month/year)	Official Use

(k) Other working experience :

3. **I attach herewith the following documents to this application :**

- (a) photocopy of my Hong Kong Identity Card
- (b) one full face photograph with name written on the back (the same as that affixed above for the certificate)
- (c) photocopies of certificate and/or testimonial of educational attainment and completion of Health Worker Training Course
- (d) reference by two referees

4. The contents of this application are true and complete to the best of my knowledge and belief.

Signature of applicant : _____

Date : _____

*Delete as appropriate

Particulars of Referees

To be completed by 2 referees who must not be family members or relatives of applicant :

(a) Name of full (Mr/Mrs/Miss/Ms)*

_____ (_____)
(in block letters) (in Chinese)

Address _____

Telephone number _____

Occupation _____

Relationship with applicant _____

Years of acquaintance with applicant _____

Signature of referee : _____

Date : _____

(a) Name of full (Mr/Mrs/Miss/Ms)*

_____ (_____)
(in block letters) (in Chinese)

Address _____

Telephone number _____

Occupation _____

Relationship with applicant _____

Years of acquaintance with applicant _____

Signature of referee : _____

Date : _____

*Delete as appropriate