

## Social Welfare Department

### Application Form for The Jockey Club IT Scheme for People with Visual Impairment (For Individual Applicants with Visual Impairment)

(Note: The applicant and nominating organisation are advised to read thoroughly the Information Notes of this Scheme before completing this form.)

#### Part A (To be filled in by the applicant)

[Please  where applicable; and \* delete where inappropriate.]

#### (1) Application Items <sup>Note</sup>

- High-performance Chinese Screen Reader (model: *Chinese JAWS*/ \_\_\_\_\_  
\_\_\_\_\_)\*)  
(Sale Price: HK\$ \_\_\_\_\_; subsidy amount requested: HK\$ \_\_\_\_\_)
- Braille (model: *Focus 40/ PAC Mate*/ \_\_\_\_\_\*)  
(Sale Price: HK\$ \_\_\_\_\_; subsidy amount requested: HK\$ \_\_\_\_\_)

The items are used for:     Studies             Employment

#### (2) Personal/ Family Particulars

a. Name:	(in English)	(in Chinese)
b. Sex/ Age:	c. Date of Birth:	
d. Identity Card No.:	e. Phone No.:	
f. Address: _____		
g. Education Level:		
<input type="checkbox"/> Primary 6 or below <input type="checkbox"/> Junior Secondary <input type="checkbox"/> Form 5 Graduate <input type="checkbox"/> Matriculated		
<input type="checkbox"/> Post-secondary <input type="checkbox"/> University <input type="checkbox"/> Other (please specify: _____)		
h. Disability Allowance: <input type="checkbox"/> Yes (File No.: _____) <input type="checkbox"/> No		
i. CSSA: <input type="checkbox"/> Yes (Case No.: _____) <input type="checkbox"/> No		
j. Name of Parent/ Guardian*:		
(for applicant under 18)		Phone No.:

<sup>Note</sup> Except for items (such as the *Chinese JAWS*) which are distributed locally by sole suppliers, application for procurement of high-performance screen reader and/or Braille display should be provided with at least **two** quotations attached to this form.

k. Information of Household Members:			
Name	Sex/ Age	Relationship with the applicant	Occupation (if he/ she is on CSSA, please specify)
Total number of household members (including the applicant):			

(3) Eligibility (no application will be considered unless the following criteria are met.)

- I am a person with visual impairment;
- I have never received subsidy under this Scheme before on the computer aids mentioned in Part A (1) above;
- I am in need of the computer aids mentioned in Part A (1) above for my studies/ employment\*;
- Currently, I do not possess any computer aids as mentioned in Part A (1) above;
- I have basic IT competency;
- I have genuine financial difficulty and cannot afford the computer aids mentioned in Part A (1) above; and
- I have not received funding from any subsidy scheme for procurement of the computer aids mentioned in Part A (1) above for the past five years.

(4) Disability

a. Visual impairment

<input type="checkbox"/> Total blindness	<input type="checkbox"/> Mild low vision
<input type="checkbox"/> Moderate low vision	<input type="checkbox"/> Severe low vision
<input type="checkbox"/> Other:	

b. Other disability

<input type="checkbox"/> Physically handicapped	<input type="checkbox"/> Viscerally disabled
<input type="checkbox"/> Mentally handicapped (level: _____)	<input type="checkbox"/> Mentally ill
<input type="checkbox"/> Hearing impairment	<input type="checkbox"/> Other:

(5) Occupation

a. Employment situation

Unemployed

Employed:

<input type="checkbox"/> Self-employed	<input type="checkbox"/> Employed by others
<input type="checkbox"/> Working full-time	<input type="checkbox"/> Working part-time
Work organisation:	
Post:	Monthly income:

b. Studies

No

Yes, name of the programme currently studying:

Programme mode: full-time/ part-time/ distance-learning\*

Name of school/ department/ programme:

\_\_\_\_\_

Year of studies/ Length of the programme and the remaining years of studies: \_\_\_\_\_

(6) Financial Condition

a. Assets

	Savings (such as cash and bank deposit)	Other assets and properties (excluding self-occupied property)	Total
Applicant			
Spouse (if applicable)			
Children (if applicable)			
Applicant under the age of 18 is required to declare his/ her parents' assets			
Father			
Mother			

b. Monthly Income

	Income from Work (excluding training allowance, such as sheltered workshop allowance)	Other Income (including returns on assets, such as rent, interest, dividend, pension, as well as living supplement provided by relatives or organisations)	Total
Applicant			
Spouse (if applicable)			
Children (if applicable)			
Father (if applicable)			
Mother (if applicable)			

(7) IT Experience

<input type="checkbox"/> Less than 3 months	<input type="checkbox"/> 3 to 6 months
<input type="checkbox"/> 6 months to 1 year	<input type="checkbox"/> 1 to 2 years
<input type="checkbox"/> Over 2 years	

(8) Reasons for Application

- a. Reasons for applying for the computer aids mentioned in Part A (1) above, including special reasons which have not been given in the above sections:

- b. Have the institution in which the applicant is studying or working installed with the computer aids supported under this Scheme?

High-performance Chinese Screen Reader:	Braille Display:
<input type="checkbox"/> Yes (model: _____ )	<input type="checkbox"/> Yes (model: _____ )
<input type="checkbox"/> No	<input type="checkbox"/> No

(9) History of Applying for Subsidy for Procurement of PC and Computer Aids

- I have never applied for this Scheme or any other IT-related subsidy scheme
- I have applied for this Scheme or any other IT-related subsidy scheme(s), details of which are as follows:

**DECLARATION:**

*I hereby declare that:*

- i) *the above information entered is true and accurate. I understand that if I willfully make any false declaration or withhold any information or mislead the Social Welfare Department(SWD) for the purpose of obtaining subsidy from this Scheme, I will have to refund such sum to SWD and be made criminally responsible; and*
- ii) *in case the subsidy is granted, I pledge not to resell or transfer any of the computer aids mentioned in Part A (1) to anyone.*

Signature: \_\_\_\_\_ (by the applicant)

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Countersign by parent/ guardian\*  
(if the applicant is under 18): \_\_\_\_\_

Name of parent/ guardian\*: \_\_\_\_\_

Date: \_\_\_\_\_

**Part B (To be filled in by the nominating organisation<sup>#</sup>)**

[Please  where applicable; and \* delete where inappropriate]

- (1) History of receiving funding support for procurement of PC and computer aids from this Scheme or any other funding/ subsidy schemes

<input type="checkbox"/> No
<input type="checkbox"/> Yes: (please specify funding source, sponsored items and amounts)

- (2) Qualifying conditions

Please comment on the following of the applicant:

i) IT competency:
ii) Financial condition:
iii) In what areas will the sponsored computer aids facilitate his/ her studies/ employment:

- (3) Supporting remarks and services to the applicant

Our school/ organisation/ department\* is of the opinion that the applicant fully meets the eligibility criteria laid down in the Information Notes of this Scheme. We believe that the procurement of the supported computer aids quoted in Part A (1) will be beneficial to his/ her studies or employment. We are also willing to

provide within our capacity the possible assistance to the applicant in using the computer aids to facilitate his/ her studies or employment.

Signature \_\_\_\_\_

Name: \_\_\_\_\_

Post: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Fax: \_\_\_\_\_

Nominating Organisation: \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_ Organisation chop: \_\_\_\_\_

April 2009  
\_\_\_\_\_

# Please note that:

This Scheme carries specific objectives, scope and approval conditions for the granting of subsidy [with particular focus on the financial ability of the applicant]. In this regard, before submitting any application, the nominating organisation is advised to look into the reasons for application as provided by the applicant in Part A (8) above, and to understand and assess his/ her needs and financial condition. The nominating organisation should as far as possible verify the information given by the applicant herein [such as requiring the applicant to submit relevant records and checking relevant information of the applicant kept in the organisation], with a view to coming up with a fair comment of and making recommendation for the applicant.

Collection and Handling of Personal Data

- 1 The data collected in this form are for SWD/ HKJCCT to process the application and may be provided to other Government Departments or agencies concerned (such as the nominating organisation) for the same purpose (including verification of information) and/ or for statistics purpose.
- 2 Except otherwise specified, applicant is not required to attach relevant documents to the application form. However, in processing and reviewing the application, SWD may request the applicant to show to SWD or authorise SWD to obtain from concerned service units relevant documentary proof for verification purpose. Failure to cooperate on this may lead to suspend processing of the application by SWD and refund of the subsidy by the applicant.
- 3 Applicant may approach SWD for access to and correction of his/ her personal data kept under this Scheme.