

公共福利金計劃 Social Security Allowance Scheme 廣東計劃及福建計劃申請表

Guangdong Scheme and Fujian Scheme Application Form

注意:	此表格免費派發。 <u>填寫前</u>	,請先詳閱「廣東計	十劃及福建計劃申	詩指引」。	請用黑色或藍色原子筆	,以正楷填寫	。如書
	寫錯誤,請用筆劃線刪改	, 並在旁簽署作實	,切勿使用塗改液	· · · · · · · · · · · · · · · · · · ·			

此欄供本署填寫 For office use

Year

Month

Day

檔案編號 Casefile Reference

申請日期

Date of Application

Note: This form is issued free of charge. Please read carefully the "Application for Guangdong Scheme and Fujian Scheme Guidance Notes" and complete all items in this form in block letters with a blue or black pen. Please cross out any incorrect entries and sign against the amendment. Do not use correction fluid.

請選擇下列其中一項計劃。Please select one scheme below.

	, . , . , ,			
	廣東計劃	Guangdong Scheme	□福建計劃	Fujian Scheme
請根據	像你所申請的津	貼,選擇下列其中一項。Please	select one below in accor	rdance with the type of allowance you would like to apply.
	普通長者生	活津貼 Normal Old Age I	Living Allowance	□ 高齡津貼 Old Age Allowance
	高額長者生	活津貼 Higher Old Age L	iving Allowance	

第一部分 申請人/申請人配偶/申請人同居人士/受委人/代理人的個人資料
Part 1 Personal data of Applicant / Applicant's Spouse / Applicant's Cohabiting Partner /
Appointee / Agent

甲. 申請人的個人 A. Applicant's per	資料 sonal data							
姓名 (中文) Name in Chinese	_			(英文) Name in English				
身份證明文件號碼 Identity document number 性別 Sex		女 Female		類別 Type of identity document		香港身份證 HK Identity Card 其他 (請註明) Others (Please spec)	香港出生證明書 HK Birth Certificate
出生日期 Date of birth	年 Year	月 Month	⊟ Day	出生地點 Place of birth	1 1	香港 Hong Kong		內地 Mainland
國籍 Country of origin		其他 (請註明) Others(Please speci		_		其他 (請註明) Others (Please spec		
取得香港居民 身份日期 Date of acquiring Hong Kong resident status	年 Year	月 Month	日 Day	方言 Dialect spoken	□廣州 Canton		□普通話 Putonghua	□ 其他 (請註明) Others(Please specify)
婚姻狀況 Marital status	□ 未婚 Never Married	□ 已婚 Married	□同居(Cohabiti	註) ng (Note)	号 nrated	□ 離婚 Divorced	□ 喪偶 Widow	ved
註:只適用於符合以下條件的提供其同居人士的個人資料。額」進行經濟審查,以評核	和經濟狀況,姑勿論	其同居人士有否正						
Note: Only applicable to case cohabiting partner; and (iii) ag applicant's cohabiting partner will be subject to the means test	rees to provide the per is/is not currently recei	sonal and financia	al information of Old Age Living	the cohabiting partner Allowance/Higher C	er to the	Social Welfare D	epartment, re	egardless of whether the
*由請人/受委人 *签	5名/指模					日田		

*申請人/受委人 *簽名/指模
*Signature/Thumbprint of *applicant/appointee
見證人 *簽名/指模
*Signature/Thumbprint of witness
□ 請在適當方格內填上「√」號。
Tick as appropriate.
SWD307 GD/FJ (11/2019)

Date

甲 申請人的個人資料(續)

A. Applicant's perso				
教育程度 Education level		准園/幼兒中心 dergarten/child care centre	小學 Primary 中學 * 1-3/4-5/6-7 年級 Secondary * 1-3/4-5/6-7	
	專業教育 (完成*中三/ Technical/vocational training (post *F.3 / F.5)	/ commercial school T	事上教育 (*非學位/學位/深造課程) ertiary(*non-degree/degree-undergraduate level / egree-post-graduate level)	
*廣東/福建省住址 Residential address in *GD/FJ			郵編 Postal code	
*廣東/福建居所類別 Accommodation status in *GD / FJ	∬ 自置 □ Self-owned □	租住 其他 (請註明 Rented Others (Please sp		
通訊地址 Correspondence address			*香港/廣東/福建 流動電話號碼 Mobile phone number in *HK/GD/FJ	
(如與住址不同,始須填寫) 電子郵箱 (如有) Email address (if any)	Only if different from residentia	ıl address)		
			高額長者生活津貼申請人而其婚姻狀 cable to a Normal / Higher Old Age L	
		tus is "Married" or "Co (英文)		
Name in Chinese 身份證明文件號碼		Name in English 類別		
Identity document number		Type of identity document	☐ HK Identity Card ☐ 其他 (請註明) ☐ Others (Please specify)	
性別 Sex	□男 □女 Male Female	出生日期 Date of birth	年 月 Year Month	日 Day
住址 Residential address	*香港/九龍/新界/廣東/ *HK/KLN/NT/GD/FJ	福建	郵編(如適用) Postal code (if any)	
*香港/廣東/福建 電話號碼	頁填寫) (Only if different from app	*香港/廣東/福建 流動電話號碼		
Telephone number in *HK / C	3D / FJ	Mobile phone number in	*HK / GD / FJ	
		自提出申請的申請人) to an applicant who is un	nable to make application by himself/her	self
姓名 (中文) Name in Chinese		(英文) Name in English		
身份證明文件號碼 dentity document number		類別 Type of identity document	□ 香港身份證 HK Identity Card	
·		J1	其他 (請註明) Others (Please specify)	
與申請人關係		關係證明文件	香港出生證明書 → HK Birth Certificate	
Relationship with applicant		Proof of relationship	其他 (請註明) Others (Please specify)	
注址 Residential address	*香港/九龍/新界/廣東/ *HK / KLN / NT / GD / FJ	福建	郵編(如適用) Postal code (if any)	
*香港/廣東/福建 電話號碼 elephone number in *HK/GD/F	ਹ 	*香港/廣東/福建 流動電話號碼 Mobile phone number in *HK / G	D/FJ	
*申請人/受委人 *簽			日期 Date	
見證人 *簽名/指模 *Signature/Thumbprint	of witness			2

丁. 代理人的個人資料(只適用於本署接納為有需要授權第三者領款的申請人) D. Agent's personal data (only applicable to an applicant who is accepted for requiring a third party to act as an agent)

₩夕 (由·	→)			
姓名 (中) Name in Chi	nese	Name in English		
身份證明 Identity docu	文件號碼 Iment number	類別 Type of identity document	□香港身份證 HK Identity Card	
identity doct		Type of Identity document		
		住址及郵編 (如適用)	Others (Please specify)	
與申請人	關係	Residential address and	*香港/九龍/新界/廣東 *HK/KLN/NT/GD/FJ	1/福建
Relationship	with applicant	Postal code (if any)	*HK / KLN / N1 / GD / FJ	
*香港/厦	黃東/福建	*香港/廣東/福建		
電話號碼 Telephone nu	umber in *HK / GD / FJ	流動電話號碼 Mobile phone number in *HK/GD/F	IJ	
	·			
第二音	部分 居住規定			
Part 2		es s		
1.	申請人在申請日期前是否已成為香港居	民最少七年?		F F
1.	Has the applicant been a Hong K		seven years before	□ 是 □ 否
	the date of application?			Yes No
2.	申請人現時在香港居住並選擇移居*廣	古(口海田松底古斗劃) /		割), 连左下刮与乙由跟
۷.	平調入現時任實/冶店任並選擇物店 演 擇其中一項,以說明在緊接申請日期前			
	/福建(只適用於福建計劃),請填寫		八江 中 明 刖 匚 1夕)	水 (
	Applicant is presently residing in Hong		in *Guangdong (only	applicable to Guangdong
	Scheme)/Fujian (only applicable to Fujian			
	absence from Hong Kong during the one-			
	resided in *Guangdong (only applicable t		= =	= =
	this application, please complete item 3 of	f this part]		
	□ 申請人在緊接申請日期前一年離末	5 共 天。		
	The applicant has been absent from I	Hong Kong for a total of	days during the or	ne-year period immediately
	before the date of application.			
	□ 申請人在緊接申請日期前一年內並	近無離港超過 56 天。		
	The applicant has been absent from	Hong Kong for not more than	n 56 days during the on	e-year period immediately
	before the date of application.			
	□ 申請人未能確定在緊接申請日期前	前一年內的離港日數。		
	The applicant cannot ascertain the	exact number of days of abse	ence from Hong Kong o	luring the one-year period
	immediately before the date of applic	ation.		
2	申請人是否已移居*廣東(只適用於廣東		建計劃) 並在緊接申	
3.	請日期前一年內並無離開*廣東(只適用			
	56 天? (只適用於透過在 2020 年 1 月	1 日至 2020 年 12 月 31 日期	間推行的單次特別安	
	排申請*廣東計劃/福建計劃的申請人》			
	Has the applicant already resided in	n *Guangdong (only applic	cable to Guangdong	. 是 . 否
	Scheme)/Fujian (only applicable to Fujia			Yes No
	(only applicable to Guangdong Scheme).			
	more than 56 days during the one-year	= -	= =	
	(only applicable to applicants applying for		_	
	Special One-Off Arrangement impleme 31 December 2020)	nted during the period from	1 1 January 2020 to	
	31 December 2020)			
	/受委人 *簽名/指模 ure/Thumbprint of *applicant/appointee		日期 Date	
_	*			
*Signat	ure/Thumbprint of witness 適當方核內值上「√」號。 * 請刪夫不適用字			

Tick as appropriate. SWD307 GD/FJ (11/2019)

	/ 同居人士(只適用於普通/婚」或「同居」)的入息及資產 「第8至9頁)						
Part 3 Income and asset vapplicable to a No status is "Married"	value of the applicant and his / her ormal / Higher Old Age Living Al " or "Cohabiting") (please refer to e and Fujian Scheme Guidance Note	lowance applicant whose marital pages 9 to 10 of "Application for					
. 每月入息(不包括子女、親戚或朋友等金錢上的津助) Income per month (excluding contributions from family members, relatives and friends, etc.)							
	申請人 Applicant	*配偶/同居人士 *Spouse/Cohabiting partner					
. 工資、手工業或生意上的入息等 Wages from employment, income from handiwork, business, etc.	□ 沒有 No□ 有 Yes HK\$	□ 沒有 No□ 有 Yes HK\$					
. 退休金/長俸 Retirement benefits/pensions	□ 沒有 No□ 有 Yes HK\$	□ 沒有 No□ 有 Yes HK\$					
. 從收租所得的淨收益 Net income on rentals collected	□ 沒有 No□ 有 Yes HK\$	□ 沒有 No□ 有 Yes HK\$					
a)「香港年金計劃」 HKMC Annuity Plan 得的固定年金	□ 沒有 No□ 有 Yes HK\$	□ 沒有 No □ 有 Yes HK\$					
Payout from the annuity scheme(s) b) 其他年金計劃 Other Annuity Scheme(s)	□ 沒有 No□ 有 Yes HK\$	□ 沒有 No□ 有 Yes HK\$					
總入息 Total income	HK\$	HK\$					
計劃及福建計劃申請指引」 B. Assets (including those in Hong to 10 of "Application for Guang	Kong, Macao, the Mainland or oversea dong Scheme and Fujian Scheme Guid	s) (see definition of "assets" at pages (ance Notes")					
	申請人 Applicant	*配偶/同居人士 *Spouse/Cohabiting partner					
1. 土地/非自住物業 Land/non-owner occupied property	□ 沒有 No□ 有 Yes HK\$	□ 沒有 No□ 有 Yes HK\$					
2. 現金 Cash in hand	□ 沒有 No □ 有 Yes HK\$	□ 沒有 No □ 有 Yes HK\$					
3. 銀行儲蓄 Bank savings	□ 沒有 No□ 有 Yes HK\$	□ 沒有 No □ 有 Yes HK\$					
4. 股票及股份的投資(包括債券、基金 及累算退休權益) Investments in stocks and shares (including bonds, trust fund and accrued retirement benefits)	□ 沒有 No□ 有 Yes HK\$	□ 沒有 No □ 有 Yes HK\$					
5. 金條及金幣等 Gold bars and gold coins, etc.	□ 沒有 No□ 有 Yes HK\$	□ 沒有 No□ 有 Yes HK\$					
6. 商業車輛(例如的士及公共小巴)及 其營業牌照 Vehicle for investment (e.g. taxi and public light bus) and its business licence	□ 沒有 No	□ 沒有 No □ 有 Yes HK\$					
總值 Total value	HK\$	HK\$					

請在適當方格內填上「√」號。 * 請刪去不適用字句。

日期 Date

^{*}申請人/受委人 *簽名/指模 *Signature/Thumbprint of *applicant/appointee

見證人 *簽名/指模 *Signature/Thumbprint of witness

第四部分 Part 4	公屋住戶 Public ren	tal housing tenant	
申請人是否公屋位 Is the applicant a public		ant?	
□ 否 No		是 (請註明*公共屋邨/中轉屋單位地址) Yes (Please specify the address of the *Public Housing Estate/Interim Public Rental Housing)	
第五部分 Part 5	旅遊證件 Travel doo		
		過期的或已失效的旅遊證件? ired or invalid travel document(s)?	
□ 香 No		是 (請註明如下) Yes (Please specify as below)	
證件類 Documen		證件號碼 簽發日期 Document number Date of issu	
<i>₩</i> .) . ÷ <i>π</i> /3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 		
第六部分 Part 6	*Applican	/受委人/代理人的香港銀行帳戶資料 t's / Appointee's / Agent's Hong Kong bank a	
	(for aut	to-payment)	
帳戶持有人姓名 Account name (Chin	艺 (中文) nese)	(英文) Account name (English)	
銀行名稱 Name of bank	_		
帳戶號碼 Account number			
第七部分	↓ ☆ ☆ 【		
2 17 III 2 4	↑中	/受委人/代理人的銀行帳戶資料(用	作收取匯款用)(可選
	擇提供:	有關資料)	
Part 7	擇提供 *Applica		
	擇提供 *Applica remittan	有關資料) nt's / Appointee's / Agent's bank account pa	
Part 7 帳戶持有人姓名	擇提供 *Applica remittan (中文) esse)	有關資料) nt's / Appointee's / Agent's bank account pa ice) (disclosure of information is optional) (英文)	
Part 7 帳戶持有人姓名 Account name (Chir 銀行及分行名稱	擇提供 *Applica remittan (中文) esse)	有關資料) nt's / Appointee's / Agent's bank account pa ice) (disclosure of information is optional) (英文)	
Part 7 帳戶持有人姓名 Account name (Chir 銀行及分行名和 Name of bank & bra 帳戶號碼	擇提供 *Applica remittan (中文) esse)	有關資料) nt's / Appointee's / Agent's bank account pa ice) (disclosure of information is optional) (英文)	
Part 7 帳戶持有人姓名 Account name (Chir 銀行及分行名和 Name of bank & bra 帳戶號碼	擇提供 *Applica remittan G (中文) lese) H nch * * * * * * * * * * * * *	有關資料) nt's / Appointee's / Agent's bank account parce) (disclosure of information is optional) (英文) Account name (English)	
Part 7 帳戶持有人姓名 Account name (Chir 銀行及分行名称 Name of bank & bra 帳戶號碼 Account number	擇提供 *Applica remittan (中文) lese) * * * * * * * * * * * * *	有關資料) nt's / Appointee's / Agent's bank account parce) (disclosure of information is optional) (英文) Account name (English)	articulars (for receipt of

第八部分 聯絡人的個人資料

Part 8 Particulars of contact person

姓名 (中文) Name in Chinese		(英文) Name in English	
與申請人關係 Relationship with applicant			
通訊地址 Correspondence address	*香港/九龍/新界/廣東/福建 *HK / KLN / NT / GD / FJ		郵編 (如適用) Postal code (if any)
*香港/廣東/福建 電話號碼 Telephone number in *HK/GD/FJ		*香港/廣東/福建 流動電話號碼 Mobile phone number in *HK/GD/FJ	

第九部分	其他資料(隨意提供)
Part 9	Other information (optional)

請註明 Please specify	_			

第十部分 聲明及保證

Part 10 Declaration and undertaking

- 本人(即下方簽署人)現聲明據本人所知,本表以上所列各項資料是正確無訛。 I, the undersigned, DECLARE that to the best of my knowledge and belief, the information in the above items is true.
- 如以上表內所列的資料有任何改變,或*本人/申請人遷離*廣東(只適用於廣東計劃)/福建(只適用於福建計劃) 適用於福建計劃)、在一個付款年度內在*廣東(只適用於廣東計劃)/福建(只適用於福建計劃) 居住少於 60 天、遭監禁或合法羈留超過 29 天,本人將從速向社會福利署或其代理機構申報。 I undertake to report immediately to the Social Welfare Department or its agent any changes in the particulars contained herein. I further undertake to report immediately to the Social Welfare Department or its agent *my/the applicant's cessation to live in *Guangdong (only applicable to Guangdong Scheme)/Fujian (only applicable to Fujian Scheme), residence in *Guangdong (only applicable to Guangdong Scheme)/Fujian (only applicable to Fujian Scheme) for less than 60 days in a payment year, imprisonment or detention in legal custody for more than 29 days.
- 本人已閱讀最後頁「收集個人資料聲明」,並明白其內容。 I have read the "Personal Information Collection Statement" at the last page and understand its content.
- 本人已經通知*本人/申請人的家庭成員及其他有關人士並獲得他們同意將他們的個人資料提供予 社會福利署及其代理機構作本申請用途。

I have informed and obtained the consents of the other members of *my/the applicant's household and other relevant persons to provide their personal data to the Social Welfare Department and its agent for the purpose of this application.

- 本人同意社會福利署及其代理機構就*本人/申請人領取公共福利金一事而進行有關的調查,包括向入境事務處、各政府部門、銀行及其他團體、人士索取*本人/申請人/和配偶或同居人士(只適用於普通/高額長者生活津貼申請人而其婚姻狀況為「已婚」或「同居」)的個人資料及記錄(例如*本人/申請人的出入境電腦資料)用來進行資料核對程序。本人亦同意該等政府部門、銀行及其他團體、人士將所需資料及記錄提供予社會福利署及其代理機構。

I consent to any investigations into the circumstances relating to *my/the applicant's receipt of Social Security Allowance being carried out by the Social Welfare Department and its agent, including but not limited to asking the Immigration Department, other government departments, banks and other parties to match *my/the applicant's personal data relating to *my/the applicant's receipt of Social Security Allowance with *my/the applicant's personal data held by such other departments or such other parties (such as *my/the applicant's travel records held on the computer) and those of *my/the applicant's spouse or cohabiting partner (only applicable to a Normal/Higher Old Age Living Allowance applicant whose marital status is "Married" or "Cohabiting"). I also consent to such government departments, banks and parties providing the requested data and records to the Social Welfare Department and its agent.

1		
*申請人/受委人 *簽名/指模 *Signature/Thumbprint of *applicant/appointee	日期 Date	
見證人 *簽名/指模 *Signature/Thumbprint of witness		
, 法则上了法国 会 与		

*本人/申請人並無向社會福利署申請或領取*公共福利金/綜合社會保障援助。 No application for *Social Security Allowance/Comprehensive Social Security Assistance has been made by *me/the applicant nor *am I/is the applicant receiving *Social Security Allowance/Comprehensive Social Security Assistance from the Social Welfare Department. (只適用於普通/高額長者生活津貼申請人)在寬限期過後,如*本人/申請人/和配偶或同居人 士(只適用於婚姻狀況為「已婚」或「同居」的申請人)的每月總入息或資產總值超逾社會福利署 所定的限額,本人必須向社會福利署或其代理機構申報(以書面通知為準)。本人明白如不申報, 將有被檢控的可能。 (For Normal/Higher Old Age Living Allowance applicant only) I undertake to notify the Social Welfare Department or its agent (in writing) if, after the grace period, the monthly income or assets of *myself/the applicant/and spouse or cohabiting partner (only applicable to an applicant whose marital status is "Married" or "Cohabiting") exceed the limits set by the Social Welfare Department. I understand that if I fail to notify the Department or its agent, I shall render myself liable to 本人明白社會福利署有權從*本人/申請人每月可得的津貼金中扣除經社會福利署核實的多領款項。 I understand that the Social Welfare Department has the right to deduct from *my/the applicant's monthly entitlements any amount certified by the Social Welfare Department as overpayment. 本人同意社會福利署從*本人/申請人/代理人的香港銀行帳戶 (銀行名稱),從*本人/申請人 任何多領款項。本人亦同意__ 述的銀行帳戶,扣除經社會福利署核實的多領款項。 I agree to the Social Welfare Department to recover any overpayment received for *me/the applicant from *my/the applicant's/the agent's Hong Kong bank account no.___ held for *my/the applicant's __(name of bank) to debit *my/the applicant's/the use and benefit. I also agree to _____ agent's bank account as specified above from time to time with any amount certified by the Social Welfare Department as overpayment. 本人明白如本人蓄意或存心提供不正確資料或隱瞞任何事項,或錯誤引導社會福利署或其代理機 構,以圖獲得現金援助,將有被檢控的可能。 I understand that if I knowingly or willfully make any false statement or withhold any information, or otherwise mislead the Social Welfare Department or its agent for the purpose of obtaining payments, it will render me liable to prosecution. 以上聲明,本人已詳細閱讀,本人亦完全明白。 The above statement has been read by me and well understood by me. *申請人/受委人 *簽名/指模 *Signature/Thumbprint of *applicant/appointee 見證人 *簽名/指模 *Signature/Thumbprint of witness 見證人姓名 Name of witness 日期 Date 申請人的近照 Recent photo of applicant

社會福利署定期/按需要與其他政府部門和有關機構進行資料核對程序。為 免觸犯法律,申請人或其受委人務必提供真確及完整資料。

The Social Welfare Department conducts data matching periodically/on need basis with other government departments and relevant organisations. To avoid violating the law, applicants or their appointees must provide true and complete information.

注意事項

Important notes

1. 在遞交申請表前,應確定有關部分完全填妥。否則本署會將申請表退回給你重新填寫。這將延誤處理你的申請。 Please ensure the relevant parts of the application form are fully completed before submission. Otherwise, the Social Welfare Department will return it to you for completion. This will delay the processing of your application.

◆普通/高額長者生活津貼申請人應填妥以下部分:

Normal / Higher Old Age Living Allowance applicant should complete the following parts:

第一部分 申請人/申請人配偶/申請人同居人士/受委人/代理人的個人資料
Part 1 Personal data of Applicant / Applicant's Spouse / Applicant's Cohabiting Partner / Appointee / Agent

第二部分 居住規定

Part 2 Residence requirements

第三部分 申請人及其配偶/同居人士(只適用於普通/高額長者生活津貼申請人而其婚姻狀況為「已婚」

或「同居」)的入息及資產

Part 3 Income and asset value of the applicant and his / her spouse / cohabiting partner (only applicable to a Normal / Higher Old

Age Living Allowance applicant whose marital status is "Married" or "Cohabiting")

第四部分 公屋住戶

Part 4 Public rental housing tenant

第五部分 旅遊證件 Part 5 Travel document

第六部分 申請人/受委人/代理人的香港銀行帳戶資料(自動轉帳用)

Part 6 Applicant's / Appointee's / Agent's Hong Kong bank account particulars (for auto-payment)

第七部分 申請人/受委人/代理人的銀行帳戶資料(用作收取匯款用)(可選擇提供有關資料)

Part 7 Applicant's / Appointee's / Agent's bank account particulars (for receipt of remittance) (disclosure of information is optional)

第十部分 聲明及保證

Part 10 Declaration and undertaking

◆高齡津貼申請人應填妥以下部分:

Old Age Allowance applicant should complete the following parts:

第一部分 申請人/申請人配偶/申請人同居人士/受委人/代理人的個人資料
Part 1 Personal data of Applicant / Applicant's Spouse / Applicant's Cohabiting Partner / Appointee / Agent

第二部分 居住規定

Part 2 Residence requirements

第四部分 公屋住戶

Part 4 Public rental housing tenant

第五部分 旅遊證件
Part 5 Travel document

第六部分 申請人/受委人/代理人的香港銀行帳戶資料(自動轉帳用)

Part 6 Applicant's / Appointee's / Agent's Hong Kong bank account particulars (for auto-payment)

第七部分 申請人/受委人/代理人的銀行帳戶資料(用作收取匯款用)(可選擇提供有關資料)

Part 7 Applicant's / Appointee's / Agent's bank account particulars (for receipt of remittance) (disclosure of information is optional)

第十部分 聲明及保證

Part 10 Declaration and undertaking

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2. 請準備「廣東計劃及福建計劃申請指引」第22頁中第一段所列的**證明文件副本**,連同填妥的**申請表及近照兩張一併寄回或親自交回社會保障辦事處(廣東計劃及福建計劃),地址:香港上水龍琛路39號上水廣場21樓2110-2111室。已填妥的申請表及證明文件副本一經遞交,恕不退回。如有需要,請你自行保存一份副本以備查閱。**

Please prepare photocopies of all relevant supporting documents (please refer to part A on page 24 of the "Application for Guangdong Scheme and Fujian Scheme Guidance Notes") and return together with the completed application form and two recent photos to Social Security Field Unit (Guangdong Scheme and Fujian Scheme) by post or in person, address: Unit 2110-2111, 21/F., Landmark North, 39 Lung Sum Avenue, Sheung Shui, Hong Kong. Completed application form and photocopies of supporting documents, once submitted, are not returnable. If necessary, please retain one copy for your own reference.

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收集個人資料聲明

Personal Information Collection Statement

向社會福利署提供個人資料*之前,請先細閱本聲明。

在會福利署(社署)及/或獲社署提供津助/資助的非政府機構,或由社署委託的非政府機構,將會使用你所提供的個人資料,向你/申請人及/或你/申請人的家人提供你/申請人及/或你/申請人的家人所需要的及由社署及/或上述非政府機構提供的援助或服務,包括(但不限於)用於監察和檢討各項服務、處理有關你/申請人及/或你/申請人的家人所獲得服務的投訴、進行研究及調查、製備統計數字、履行法定職責等。向社署提供個人資料純屬自願。不過,如你未能提供所要求的個人資料,本署可能無法處理你的申請或向你/申請人及/或你/申請人的家人提供援助/服務。

- 可能獲轉移資料者
 ②. 你所提供的個人資料,會按需要知道的原則提供給在本署工作的職員。除此之外,該等個人資料亦可能會為上文第 1 段所述的目的而向下列機構/人士披露,或在下述情況下披露:
 (a) 其他機構/人士披露,或在下述情况下披露:
 (i) 審批及/或評估你/申請人及/或你/申請人的家人就上文第 1 段所提及社署及/或非政府機構向你/申請人及/或你/申請人的家人提供服務/援助而提出的任何申請;
 (ii)上文第 1 段所提及社署及/或非政府機構向你/申請人及/或你/申請人及/或你/申請人及/或你/申請人及/或你/申請人的家人所提供的服務/援助;或(iii)監察和檢討上文第 1 段所提及社署及/或非政府機構所提供的服務,或製備統計數字;
 (b) 處理投訴的機構(例如申訴專員公署、個人資料私隱專員公署、社會工作者註冊局、立法會等),如果這些機構正在處理有關社署向你/申請人及/或你/申請人的家人所提供的服務或援助的投訴;
 (c) 法律授權或法律規定須披露資料;或(d) 你曾就披露資料給予訂明同意。

- 查閱個人資料 3. 按照《個人資料(私隱)條例》(第 486 章),你有權就社署所持有的有關你的個人資料提出查閱及改正要求。本署提供個人資料複本將須收取費用。如需查閱或改正社署收集的個人資料,請向社會保障辦事處(廣東計劃及福建計劃)主任提出(有關社會保障辦事處(廣東計劃及福建計劃)的地址及電話號碼,請參閱申請指引第 23 頁)。
- *根據《個人資料(私隱)條例》(第486章),個人資料指符合以下說明的任何資料—(a)直接或間接與一名在世的個人有關的; (b)從該資料直接或間接地確定有關的個人的身份是切實可行的;及 (c)該資料的存在形式令予以查閱及處理均是切實可行的。

Please read this notice before you provide any personal data" to the Social Welfare Department

Purposes of Collection

1. The personal data supplied by you will be used by the Social Welfare Department (SWD) and/or those non-governmental organisations ("NGOs") which receive subventions or subsidies from or which are commissioned by SWD to provide you/the applicant and/or your/the applicant's family members with assistance or service from SWD and/or the aforementioned NGOs which is relevant to the needs of you/the applicant and/or your/the applicant's family members, including but not limited to monitoring and reviewing of services, handling complaints related to the services provided to you/the applicant and/or your/the applicant's family members, conducting research and surveys, preparing statistics and discharging statutory duties. The provision of personal data to SWD is voluntary. However, if you fail to provide the personal data requested of you, we may not be able to process your application or provide assistance/service to you/the applicant and/or your/the applicant's family members.

<u>Classes of Transferees</u>

2. The personal data you provide will be made available to persons working in SWD on a need-to-know basis. Apart from this, they may be disclosed to the

parties or in the circumstances listed below for the purposes mentioned in paragraph 1 above
(a) Other parties such as government bureaux/departments, the Hospital Authority, NGOs and public utility companies if they are involved in:

(i) processing and/or assessing any application from you/the applicant and/or your/the applicant's family members for the provision of service/assistance to you/the applicant and/or your/the applicant's family members by SWD and/or the NGOs mentioned in paragraph 1 above;

(ii) the provision of service/assistance to you/the applicant and/or your/the applicant's family members by SWD and/or the NGOs mentioned in paragraph 1 above; or

(iii) monitoring and reviewing of the services provided by SWD and/or the NGOs mentioned in paragraph 1 above or preparing statistics; Complaint handling authorities such as the Office of the Ombudsman, the Office of the Privacy Commissioner for Personal Data, the Social Workers Registration Board, the Legislative Council, etc. if they are handling complaints about the services or assistance provided to you/the applicant and/or (b) your/the applicant's family members by SWD; Where such disclosure is authorised or required by law; or

Where you have given your prescribed consent to such disclosure.

Access to Personal Data

- You have the right to request access to and correction of your personal data held by SWD in accordance with the Personal Data (Privacy) Ordinance, Cap 486. A fee is charged for supplying copies of personal data. Requests for access to and correction of personal data collected by SWD should be addressed to the supervisor of Social Security Field Unit (Guangdong Scheme and Fujian Scheme) (please refer to page 26 of the Guidance Notes for the address and telephone number of Social Security Field Unit (Guangdong Scheme and Fujian Scheme)).
- # Under the Personal Data (Privacy) Ordinance, Cap. 486, personal data means any data –

(a) relating directly or indirectly to a living individual;

- (b) from which it is practicable for the identity of the individual to be directly or indirectly ascertained; and
- (c) in a form in which access to or processing of the data is practicable.

	此欄供本署填寫 For office use	
收表格日期蓋印 Official chop for receipt of application form	調查員簽名 Signature of Investigating Officer 調查員姓名及職級 Name & rank of Investigating Officer 調查完成日期 Date of completion of investigation	

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