<u>社會福利署</u> Social Welfare Department

緊急救援基金申請表 - 傷亡補助

Emergency Relief Fund Application Form - Grants in respect of death or personal injury

甲部 PART A				
			£ . 16 £	
受害人姓名	(*** T 1' 1)			
Name of Victim (中文 Chinese)		Sex	Age	
住址				電話號碼
Residential Address				Tel. No.
通訊地址(如與住址不同) Correspondence Address (if difference	ant from residential	addrass)		聯絡電話號碼 Contact Tel. No.
_				
婚姻狀況 Marital Status	-	r) ne of incider	nt)	
入息	•		*	
Income		Date of in		
地點				
Location			X急救濟證	 號碼.
				Relief Chit No
本人擬申請緊急救援基金並同意				
I wish to apply for Emergency Rel	ief Fund and hereby	give my cor	nsent :-	
轉交醫院管理局/衛生署重衛生署的醫生診視。 to the SWD making medical eng from) any relevant hospitals and Relief Fund. I understand that may be referred to the Hospital A victim may be required to underg	新評估病假,並明的 puiries about *my / vic / or medical practitione the victim's sick leave Authority / Department to medical examination / 受害人的僱主查說 re to make enquiry to but it is with the company of the comp	白如有需要 etim's medica ers, to facilitate certificate(s) t of Health fo n by doctors of a * 本人/ o *my / victin	,社會福利 al conditions te the determ , when and v r re-assessm of the Hospit 受害人的』 m's employe	er(s) regarding details of *my / victim's
本人承諾會通知*本人/受害人的	的家庭成員及本表材	各所提及的	其他有關人	土,他們的個人資料已提供予社
	ers of *my / the victim ³ I to the Social Welfare	's household a		evant persons mentioned in this form that se of this application and the relevant debt
與受害人的關係 (如申請人並非受害人)				
Relationship with victim (if applic)		* 受害人/申請人簽署
由注 协切工委还赊开 /占位 !	カスミン			Signature of *victim / applicant
申請人地址及電話號碼 (如與上 Address and telephone no. of appli		m abova)		
Address and telephone no. of appli	.cam (11 unitetent 110	iii above)		 日期
				Date
				Duic

註:申請必須於事件發生後六個月內提出。

Note: The application must be made within 6 months from the date of incident.

^{*} 請刪去不適用句子 Delete whichever is inappropriate

**I. Family Composition (Relatives living with victim)

						Degree of financial	
			Relationship		Monthly	dependency on victim	
	Sex/	HKIC/	with the	Occupation/	Income /	(A) Whole	(B) Partial
Name	Age	BC No.	victim	Schooling	School Fee(s)	(C) Nil	(D) Expected

**II. Particulars of Interested Relatives not Living with Victim

Name	Sex/ Age	HKIC/ BC No.	Relationship with the victim	Occupation/ Schooling	Monthly Income/ School Fee(s)	Degree of financial Dependency on victim (A) Whole (B) Partial (C) Nil (D) Expected	Address

^{**} Applicable to fatal cases only

III.	Report by	Investigating	Officer
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Hospital fee receipts / sick leave cer	tificates at encl. ()		
Funeral expenses receipt at encl. ()			
Employer's statement at encl. ()			
Investigated by Na	ame & Rank		Date	

收集個人資料聲明

向社會福利署提供個人資料*之前,請先細閱本聲明。

收集資料的目的

1. 社會福利署(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/受害人及/或你/受害人的家人提供你/受害人及/或你/受害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/受害人及/或你/受害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,以及追收與你/受害人及/或你/受害人的家人所獲得的援助/服務相關的債項。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/受害人及/或你/受害人的家人提供援助/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(例如政府決策局/部門、醫院管理局、非政府機構、公用事業公司等),**如**該等機構/人士有參與以下事項:
 - (i) 審批及/或評估你/受害人及/或你/受害人的家人就上文第 1 段所提及社署及/或非政府機構向你/受害人及/或你/受害人的家人提供服務/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/受害人及/或你/受害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 /受害人及/或你/受害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領收取費用。如需查閱或改正社署收集的個人資料,請向有關社會保障辦事處主任提出(有關各區社會保障辦事處的地址及電話,請瀏覽本署網頁:https://www.swd.gov.hk/tc/index/site_pubsvc/page_socsecu/sub_addressesa/)。

- *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。

Personal Information Collection Statement

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

<u>Purposes of Collection</u>

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 victim and/or your/the victim's family members with assistance or service from SWD and/or the aforementioned NGOs which is relevant to the needs of you/the victim and/or your/the victim's family members, including but not limited to monitoring and reviewing of services, handling complaints related to the services provided to you/the victim and/or your/the victim's family members, conducting research and surveys, preparing statistics and discharging statutory duties, as well as recovering debt related to the assistance/service provided to you/the victim and/or your/the victim's family members. 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 victim and/or your/the victim's family members.

Classes of Transferees

- 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 victim and/or your/the victim's family members for the provision of service/assistance to you/the victim and/or your/the victim's family members by SWD and/or the NGOs mentioned in paragraph 1 above;
 - (ii) the provision of service/assistance to you/the victim and/or your/the victim'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;
 - (b) 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 victim and/or your/the victim's family members by SWD;
 - (c) Where such disclosure is authorised or required by law; or
 - (d) Where you have given your prescribed consent to such disclosure.

Access to Personal Data

3. 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 the respective social security field units (For addresses and telephone numbers of social security field units, please visit our Departmental Homepage: https://www.swd.gov.hk/en/index/site_pubsvc/page_socsecu/sub_addressesa/).

- * 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.