**樂 齡 及 康 復 創 科 應 用 基 金 申 請 表 格**

**( 購 置 科 技 產 品 )**

**Innovation and Technology Fund for Application in Elderly and Rehabilitation Care**

**Application Form**

**(Procurement of Technology Product)**

在填寫此份表格前，請仔細參閱附錄4的指引及樂齡及康復創科應用基金手冊。

Please Study the Guidance Notes at Appendix 4 and the Innovation and Technology Fund for Application in Elderly and Rehabilitation Care Manual carefully before you complete the form.

一般資料表

General Information Sheet

1. 申請撥款的服務機構／院舍營辦人簡介

Brief description of the applicant organisation/operator

|  |  |
| --- | --- |
| 營辦機構／營辦人：(中) Operating agency/operator: (English) *(須同時以中文和英文填寫* *should be completed in both English and Chinese)* | 按一下這裡以輸入文字。Click here to enter. |
|  |  |
| 通訊地址：(中)Correspondence address: (English)*(須同時以中文和英文填寫* *should be completed in both English and Chinese)* | 按一下這裡以輸入文字。Click here to enter. |
|  |  |
| 電話號碼 Telephone number: | 按一下這裡以輸入文字。Click here to enter. |
|  |  |
| 傳真號碼 Fax number | 按一下這裡以輸入文字。Click here to enter. |
|  |  |
| 電郵地址 E-mail address: | 按一下這裡以輸入文字。Click here to enter. |
|  |  |
| 負責員工 Responsible staff: | 按一下這裡以輸入文字。Click here to enter. |
|  |  |
| 現正接受社會福利津貼Currently receiving subsidies from SWD: | N |

|  |  |
| --- | --- |
| 機構性質Nature of organisation | **請按一下這裡選擇一項。Please Click here to select 1 item ONLY.** |

|  |  |
| --- | --- |
| 申請性質Type of application | **請按一下這裡選擇一項。Please Click here to select 1 item ONLY.** |

|  |  |
| --- | --- |
| 服務單位類別Type of service unit(s) | **請按一下這裡選擇一項。Please Click here to select 1 item ONLY.** |

1. 其他基金或捐助

Other funding or donation

[ ]  無：是項申請科技產品並無其他基金／捐款資助。

 No: There is not any other funding/donation received on the same applied innovative technology product.

[ ]  有：是項申請科技產品獲其他基金／捐款資助。

Yes: There is other funding/donation received on the same applied innovative technology product.

|  |  |
| --- | --- |
| 基金／捐款名稱：Name of funding/donation: | 按一下這裡以輸入文字。Click here to enter. |
| 基金／捐款性質：Nature of funding/donation: | [ ] 政府 Government [ ] 非政府 Non-government |
| 基金／捐款款項金額：Amount of funding/donation: | 港幣 HK$ 按一下這裡以輸入文字。Click here to enter. |

**聲明**

**Declaration**

本人代表 按一下這裡以輸入文字。 ，並獲其正式授權，作出以下聲明：

 *(申請機構／院舍營辦人名稱)*

I, on behalf of and duly authorised by Click here to enter., declare that

 *(Name of the Applicant Organisation/Operator)*

1. 本申請表格內的資料及夾附於申請表格的資料，均屬真實無誤，並反映截至提交申請當日的真實情況。本人承諾，如上述資料日後如有任何更改會立即通知社會福利署。如填報資料不確，申請將被視為無效，同時，社會福利署將取消已批准的撥款，而已支付的款項亦須全數退還《樂齡及康復創科應用基金》。蓄意虛報資料或隱瞞任何重要資料者有可能被轉介到執法機關處理；

all factual information provided in this Application Form as well as the accompanying information are true and accurate and reflect the status of affairs as at the date of submission. I undertake to inform the Social Welfare Department immediately if there are any subsequent changes to the above information. Any inaccurate information will make the application invalid such that any grant approved will be withheld and payment made must be refunded in full to the “Innovation and Technology Fund for Application in Elderly and Rehabilitation Care”. Making false declarations or withholding material information may result in referral to law enforcement authorities.

1. 如申請獲得批准，承諾會竭盡所能，按照本申請的批准項目完成計劃，並監察其過程；

utmost dedication and determination will be given to complete and monitor the funded project according to the approved terms of this application if the application is approved;

1. 申請機構／院舍營辦人已通知與本申請有關的所有人士／機構，政府可使用本申請表格內的個人資料以審批本申請、履行法定職責、進行有關研究及調查、監察和檢討本申請的處理及整理統計數字；

the applicant organisation/operator has informed all individuals / parties concerned in this application of the Government’s right to the use of their personal data contained in this application form to process this application, discharge statutory duties, conduct research or surveys, monitor and review the handling of this application and prepare statistics;

1. 本人在填寫此份表格時已經仔細參閱表格內附錄4的指引及《樂齡及康復創科應用基金手冊》。同時，亦已附上所有需要的有關文件以供審閱；

I have read the Guidance Notes at Appendix 4 and the “Innovation and Technology Fund for Application in Elderly and Rehabilitation Care Manual” carefully before completing this form and have also enclosed all the supporting documents required;

1. 申請機構／院舍營辦人、其管理委員會、首長或職員於是項申請科技產品並無任何擁有權或成份。

the applicant organisation/operator, its Board of Management, Head or staff does not have any ownership or share of ownership of the applied innovative technology product.

|  |  |  |  |
| --- | --- | --- | --- |
| 只需在印文本蓋上印章及簽署Chop and signature required for **hardcopy ONLY**. | 院舍／機構印章RCHs/Organisation chop | ： |  |
|  | 機構首長／院舍營辦人簽署Signature of agency head/operator | ： | (簽署) (Signature) |
| *(須同時以中文和英文填寫**should be completed in both English and Chinese)* | 機構首長／院舍營辦人姓名 (中) | ： | 按一下這裡以輸入文字。 |
| Name of agency head/operator (English)  | ： | Click here to enter. |
| 機構首長職位名稱 (中) | ： | 按一下這裡以輸入文字。 |
| Post title of agency head (English) | ： | Click here to enter. |
|  | 電話號碼Telephone No. | ： | 按一下這裡以輸入文字。Click here to enter. |
|  | 日期Date | ： | 按一下這裡以輸入日期。Click here to enter. |

**購 置 科 技 產 品**

申 請 樂 齡 及 康 復 創 科 應 用 基 金 撥 款 詳 情 ( 見 註1, 2)

Details of Application for

Innovation and Technology Fund for Application in Elderly and Rehabilitation Care Grant for

**Procurement of Innovative Technology Product** (see Note1, 2)

*註1：請提供至少一份****報價單及產品單張，****內容包括價格細項、規格、證書和所需專業人員。*

*Note1: Please provide at least one* ***quotation and the product catalog*** *with details including price details, specifications, certification and required operating professional。*

*註2：每份申請只可涵蓋一個產品或計劃。*

*Note2: Each application should only cover one product or project.*

|  |  |
| --- | --- |
| 是否「認可科技應用產品」參考清單的產品?Procurement of product on the reference list of “Recognised Technology Application Products”? (Y/N) | 選擇Y/N。Choose Y/N. |
| 「認可科技應用產品」參考清單的**項目編號(例如1.1、1.2)****Item number from the reference list** of “Recognised Technology Application Products” **(e,g, 1.1, 1.2)** | 按一下這裡以輸入文字。Click here to enter. |
| 產品名稱 (須與報價單一致)Product name (identical to quotation)*(須同時以中文和英文填寫**should be completed in both English and Chinese)* | (中) 按一下這裡以輸入文字。(English 英) Click here to enter. |
| 產品品牌 (須與報價單一致)Brand name (identical to quotation) | 按一下這裡以輸入文字。Click here to enter. |
| 產品型號 (須與報價單一致)Model No. (identical to quotation) | 按一下這裡以輸入文字。Click here to enter. |
| 產品規格 Specification **(請參考清單參考細節)****(Please refer to reference specification in reference list** of “Recognised Technology Application Products”**)** | 按一下這裡以輸入文字。Click here to enter. |
| 證書 (如有，請註明)Certification (If any, please state) | 按一下這裡以輸入文字。Click here to enter. |
| 服務單位Service Unit(s) |
| 編號No. | 服務單位名稱 Name of Service unit | *(須同時以中文和英文填寫**should be completed in both English and Chinese)* | 服務單位類別 (見附錄5)Type of Service Unit (see Appendix 5) |
| 1 | 按一下這裡以輸入文字。Click here to enter. | 選擇一個分類。Choose one Category. |
| 2 | 按一下這裡以輸入文字。Click here to enter. | 選擇一個分類。Choose one Category. |
| 3 | 按一下這裡以輸入文字。Click here to enter. | 選擇一個分類。Choose one Category. |
| 4 | 按一下這裡以輸入文字。Click here to enter. | 選擇一個分類。Choose one Category. |
| 5 | 按一下這裡以輸入文字。Click here to enter. | 選擇一個分類。Choose one Category. |
| Service unit number服務單位編號 | 1 | 2 | 3 | 4 | 5 |
| *以下資料須與報價單一致：**The information below should be identical to quotation:* |
| 產品數量Quantity of product |   |   |   |   |   |
| 單價(元) (折扣後)Unit rate ($) (after discount) | 按一下這裡以輸入文字。Click here to enter. |
| 款額(元) (數量 × 單價)Amount ($) (Quantity × unit rate) |   |   |   |   |   |
| 保養費用總數(元)Maintenance fee (total) ($)  |   |   |   |   |   |
| 保養時期(年) **(不包括隨產品附送的保養年期)**Period of maintenance requested (year) **(exclude the free maintenance period provided)** |   |   |   |   |   |
| 保養內容(例如上門維修、人工，配件等):Maintenance coverage (e.g. onsite maintenance, labour and parts etc.) | 按一下這裡以輸入文字。Click here to enter. |
| 員工使用科技產品訓練費用(元) Staff training fee for using the technological product ($)  |   |   |   |   |   |
| 雜項費用(元)Miscellaneous expense ($) |   |   |   |   |   |
| 總款額(元) (包括**產品購置及所有有關費用**)Total amount ($) (including **product procurement and all related fees**) |   |   |   |   |   |
| 總款額(元) (包括所有**服務單位**)Total amount ($) (including all **service units**) | 按一下這裡以輸入文字。Click here to enter. |
|  |
| 預計產品可使用年期 (年)Expected sustainability of product (year) | 按一下這裡以輸入文字。Click here to enter. |
| 是否需要專業人員操作該產品? Professional required to operate the product? (Y/N) | 選擇Y/N。Choose Y/N. |
| 所需專業人員的類別Type of professional required | 按一下這裡以輸入文字。Click here to enter. |
| 申請服務單位有所需操作產品的專業人員? Professional available on site to operate the product (Y/N) | Choose Y/N. | Choose Y/N. | Choose Y/N. | Choose Y/N. | Choose Y/N. |
| 如有任何申請服務單位並無所需操作產品的專業人員，有何應對方案? Alternatives when a service unit does not have professional to use the product as required?  | 按一下這裡以輸入文字。Click here to enter. |
| 產品受惠人類別和數目Type and number of beneficiaries of the product | [ ] 長者(年齡60歲或以上) Elderly (aged 60 or above)\_\_\_\_\_\_\_\_人persons[ ] 殘疾人士Persons with disabilities殘疾類別 Type of disability：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_人persons[ ] 護理人員 Care staff\_\_\_\_\_\_\_\_人persons(請在適當的方格內加上「🗸」號。)(Please“🗸”where appropriate.) |
| 理據 (請詳述產品對受眾帶來的益處。如申報項目包含多個組件/服務項目，則每個組件/服務項目必須提供相應的申請理據。)Justification (Please elaborate how the product could benefit the beneficiaries. If the application includes multiple components/ service items, justification should be provided for each of them.) | 按一下這裡以輸入文字。Click here to enter. |
| 請說明申請機構／院舍營辦人如何有經驗、能力和專業知識使用有關產品，以及供應商所提供的產品訓練詳情Elaboration on the applicant organization's experience, ability and professional knowledge in using the applied product, and details on training by the vendor | 按一下這裡以輸入文字。Click here to enter. |