Hong Kong Paralympians Fund
(2027-28)

Employment Facilitating Grant for Retired Athletes with Disabilities

Application Form

The information you provide in this application form is the basis for assessing eligibility for the Employment Facilitating Grant for Retired Athletes with Disabilities of the Hong Kong Paralympians Fund (the Fund). **The Guidelines on Application of the Fund and its annexes should be read when completing this application form**. Application Form and Guidelines can be downloaded from the Social Welfare Department website (https://www.swd.gov.hk/en/pubsvc/rehab/cat_fundtrustfinaid/hkpf/).

Please submit the completed form either by post (according to postmark) or by hand to the following address on or before **4 January 2027 (Monday), 5:00 pm**. **Late submissions or incomplete application form will NOT be considered.**

The Secretariat, Hong Kong Paralympians Fund
Rehabilitation and Medical Social Services Branch
Social Welfare Department
Unit 201, 2/F, THE HUB
23 Yip Kan Street
Wong Chuk Hang, Hong Kong

(A) Personal Particulars

Sports:
From_____(mm/yyyy)to_____(mm/yyyy)

Name (Chinese)	**Name (English)**
Hong Kong Identity Card No.	**Nationality**
Sex (Male/Female)#	**Age**
Date of birth (dd/mm/yyyy)	**Place of birth**
Residential address	
Correspondence address (if different from residential address)	
Contact telephone number	
Planned/Official date of retirement (dd/mm/yyyy) *(Please provide official documentation. For applicants not yet officially retired, the sports organisation is required to complete Annex 1)*	

Please delete as appropriate

(B) Record of Sporting Achievements

- Provide information on three of your best performances in order of merit at international competitions in which you have competed from or after 2000 Paralympic Games.
- **Part I and/or II** below **must be completed with documentation** supporting all your achievements (e.g. official results, press reviews, etc.).
- Use a separate sheet if additional writing space is required.

I. Individual Results

Date	**Name of Competition & Venue** ^	**Event** **(e.g. 100m, singles, etc.)** ^	**Results/ Position**	**No. of Entries for your Event**	**Type of Supporting Document** **[official result / press review / others (please specify)]**

II. Team Results (The applicant as a member of the team)

Date	**Name of Competition & Venue** ^	**Event** **(e.g. relay, doubles, etc.)** ^	**Results/ Position**	**No. of Entries for your Event**	**Name(s) of Team Member(s)**	**Type of Supporting Document** **[official result / press review / others (please specify)]**

^ ***Please provide both English and Chinese versions for record purpose.***

(C) Record of Employment (the last 3 jobs)

Name of Company / Organisation	Job Title/ Nature	Income Per Month ($)	From (dd/mm/yy) to (dd/mm/yy)

(D) Prospective : (i) Job Attachment / Open Employment
(ii) Education / Vocational Training Programme

(to be completed by the Applicant)
[please complete either (i) or (ii) ; or both (i) and (ii)]

(i) Prospective Job Attachment / Open Employment
Name and address of the company / organisation:
_____
_____
Nature of employment: _____
Job title: _____
Expected monthly salary (including grant from the Fund) ($)(if applicable):
_____
Expected period of employment [from (dd/mm/yyyy) to (dd/mm/yyyy)]:
_____
(please ask prospective employer to complete Annex II)

(ii) Prospective Education / Vocational Training Programme
Name and address of the organisation:
_____
_____
_____
Nature: _____
Title: _____
Fee ($): _____**(per month/one-off[#])**
Period [from (dd/mm/yyyy) to (dd/mm/yyyy)]:
_____

(please attach supporting documentation, e.g. course details, receipts, etc.)

[#] ***Please delete as appropriate***

(E) Reasons/Justifications for Application for the Employment Facilitating Grant

(F) Any Other Funding Support for This Proposal

Funding sources	Amount per month ($)	From (dd/mm/yy) To (dd/mm/yy)

(G) Any Other Allowance / Assistance Currently Receiving including the Comprehensive Social Security Assistance

Name of allowance / assistance	Amount per month ($)

(H) Applicant's Declaration

I declare that the information I have provided in this application is true and correct. I understand that non-conformity with the prospective job attachment/open employment/education programme/vocational training programme as listed in part (D) above without valid reasons, or breach of terms in the Agreement might result in cessation of funding and a refund in whole or in part of the payment.

Signature of applicant: _____ Date: _____

(I) Recommendation by the Coaching / ex-Coaching Supervisor
(to be completed by the Coaching / ex-Coaching Supervisor)

Name of Coaching / ex-Coaching Supervisor

(English): _____ (Chinese): _____
Address: _____

_____
Day Time Contact Tel. No.:

_____
Qualification: _____
Position at the Sports Organisation listed in (J) below:

_____
Recommendation:

Signature: _____ Date: _____

(Please attach documentation / supplementary information where necessary)

(J) Recommendation by the Sports / ex-Sports Organisation
(to be completed and signed by a responsible official of the Sports / ex-Sports Organisation)

Name of Sports / ex-Sports Organisation:

_____

Address:

_____

_____

Recommendation:

Signature: _____ Date: _____
Name: _____(English) _____ (Chinese)
Position: _____
Day Time Contact Tel. No.: _____

Organisation Chop: _____

(Please attach documentation/supplementary information where necessary)

Annex I

Hong Kong Paralympians Fund
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Retirement Plan of the Applicant

Please complete this form by the sports organisation, and attach it to the main application for submission.

Name of Applicant: _____ (English) _____ (Chinese)

Goal of Retirement Plan

Plan of Action

Implementation Schedule

Alternative Plan (if any)

Signature: _____ Date: _____

Name: _____ (English) _____ (Chinese)

Position at Sports Organisation: _____

Day Time Contact Tel. No.: _____

Email Address: _____

Organisation Chop: _____

(Please attach documentation/supplementary information where necessary)

Annex II

Hong Kong Paralympians Fund
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Application Form

Endorsement by the Prospective Employer

Please detach this form from the main application for completion by the prospective employer, and re-attach it to the main application for submission via the sports organisation.

Name of company / organisation:

_____

Address

_____

Name of applicant: _____English) _____ (Chinese)
Nature of prospective employment:

_____

Job title: _____
Expected monthly salary (including grant from the Fund)($)(if applicable):

_____

Expected period of employment [from (dd/mm/yyyy) to (dd/mm/yyyy)]:

_____

Expected working hours:

_____

Comments:

Signature: _____ Date: _____
Name: _____ (English) _____ (Chinese)
Position at the company / organisation: _____
Day time contact tel. no.: _____

Company / Organisation Chop: _____

(Please attach documentation/supplementary information where necessary)