Application No. [ ]
(for internal use only)

Social Welfare Department
Application Form for the IT Scheme for People with Visual Impairment[1]

(For Organisational Applicants Only)

The applicant organisation is advised to read the Information Note on the IT Scheme for People with Visual Impairment (PVI) thoroughly before completing this form.

(Please tick ("✓") the boxes where applicable and * delete as appropriate.)

Part I Basic Information on Applicant Organisation and Contact Person		
1. Name of applicant organisation:		
2. Hong Kong Business Registration Number (if available):		
3. Nature of applicant organisation:	☐ Non-governmental social welfare organisation	☐ Self-help group for PVI
	☐ Special school	☐ Local tertiary institution
	☐ Other, please specify:_____	
4. Target Service Users of Applicant Organisation:		
5. Name of Officer in Charge:		
6. Position of Officer in Charge:		
7. Name of Contact Person:		
8. Position of Contact Person:		
9. Phone No.:		
10. Fax No.:		
11. Email Address:		
12. Correspondence Address:		

[1] The completed application form, together with the supporting documents, should be sent by post to the Marketing Consultancy Office (Rehabilitation), Social Welfare Department [Attn: EOI(MC) – IT Scheme for PVI], Unit 503, 5/F, West Coast International Building, 2290-296 Un Chau Street, Sham Shui Po, Kowloon. For enquiries, please contact the Office at 3586 3594.

Part II Proposed Item(s)		
Please provide in the table below information on the Chinese screen reader(s) and/or Braille display(s) and/or assistive device(s) covered under the Scheme that your organisation proposes to purchase. (Please provide **at least two quotations** for each of the following proposed items. If an item is available exclusively from a local supplier, please provide **the supplier's quotation along with a letter certifying that it is the sole distributor**.)		
13. **Proposed Item 1**		
(a) Proposed location where the device will be made available:		
(b) Estimated number of PVI who will use the device:		
(c) Type of computer assistive device:	☐ Chinese screen reader ☐ Braille display ☐ Assistive/portable device	
(d) Model of computer assistive device:		
(e) Quantity applied for:		
(f) Unit Price (HKD):		
(g) Total amount of subsidy sought (HKD):		
(h) Justification for application:		
(i) Does the applicant organisation currently possess the above-mentioned device(s)?	☐ Yes	☐ No
(j) Does the applicant organisation currently possess similar device(s)?	☐ Yes	☐ No
If the answer to item 13(i) or 13(j) is "Yes", please complete items 13(k) to 13(n) below.		
(k) Model of existing device(s):		
(l) Quantity of existing device(s):		
(m) Years in service:		
(n) Funding source(s) of existing device(s):		

If the applicant organisation wishes to apply for more than 1 item, please reuse this page as necessary, and indicate the priority of each proposed item. Otherwise, please skip this page.	
14. **Proposed Item** _____	
(a) Proposed location where the device will be made available:	
(b) Estimated number of PVI who will use the device:	
(c) Type of computer assistive device:	☐ Chinese screen reader ☐ Braille display ☐ Accessories/portable devices
(d) Model of computer assistive device:	
(e) Quantity applied for:	
(f) Unit price (HKD):	
(g) Total amount of subsidy sought (HKD):	
(h) Justification for application:	
(i) Does the applicant organisation currently possess the above-mentioned device(s)?	☐ Yes ☐ No
(j) Does the applicant organisation currently possess similar device(s)?	☐ Yes ☐ No
If the answer to item 14(i) or 14(j) is "Yes", please complete items 14(k) to 14(n) below.	
(k) Model of existing device(s):	
(l) Quantity of existing device(s):	
(m) Years in service:	
(n) Funding source(s) of existing device(s):	

15. Please read the following statements carefully and check the boxes to indicate that the applicant organisation acknowledges and agrees to each statement.

- ☐ The contact person of the applicant organisation hereby applies, on behalf of the above-mentioned applicant organisation, to purchase the Chinese screen reader(s) and/or Braille display(s) and/or assistive devices* covered under the Scheme for use at the location(s) listed above.
- ☐ The applicant organisation does not have the assistive computer device(s) proposed for purchase and/or devices with similar functions at the location(s) listed above.
- ☐ The applicant organisation has not applied for any other subsidies in respect of the computer assistive devices proposed for purchase.
- ☐ The applicant organisation undertakes to take reasonable steps to facilitate priority access for PVIs to the above-mentioned computer assistive devices.

Part III Declaration of the Applicant Organisation

Declaration

1. The officer in charge and the contact person of the applicant organisation have read and understood the "Information Note on the IT Scheme for PVI" and the "Notice to Data Subject Before Collection of Personal Data" (see **Appendix** to this form).
2. The applicant organisation agrees to visits by staff of Social Welfare Department (SWD) for the purpose of inspecting its existing computer assistive devices and assessing the location(s) where the proposed item(s) will be made available.
3. The information provided in this application is true and accurate. The applicant organisation understands that it will not only be required to refund the subsidy but may also be liable to criminal prosecution if it wilfully or intentionally makes any false declaration, withholds any information, or misleads SWD with a view to obtaining said subsidy under the Scheme.
4. The contact person of the applicant organisation agrees to assist SWD in processing, reviewing and following up on the application, and understands that failure to provide the required information may lead to SWD terminating this application, or requiring the applicant organisation to refund any subsidy already received.
5. The applicant organisation acknowledges that if the amount applied for exceeds the funding cap for each type of computer assistive device stipulated under the Scheme, it will be required to bear the difference at its own cost.
6. If the subsidy is approved, the applicant organisation undertakes not to sell, lease, or otherwise transfer the above-mentioned subsidised assistive device(s) to any other organisation or individual.

Signature of Officer in Charge: _____

Name of Officer in Charge: _____

Signature of Contact Person: _____

Name of Contact Person: _____

Date: _____

Organisation chop: _____

Appendix

Notice to Data Subject Before Collection of Personal Data

Please read this notice carefully 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) to provide you with appropriate assistance or services relevant to your needs, including but not limited to the monitoring and review of services, the conduct of research and surveys, and the discharge of statutory duties. The provision of personal data to SWD is voluntary. If you do not provide sufficient personal data, SWD may not be able to process your application or provide assistance or services to you.

Classes of Transferees

2. The personal data you provide will be made available to persons working in the Department on a need-to-know basis. Apart from this, they may only be disclosed to the relevant parties or in the circumstances listed below -

(a) Other parties such as government bureaux/departments, non-governmental organisations and public utility companies if they are involved in the assessment of your application, or the provision of services/assistance to you;
(b) Where such disclosure is authorised or required by law; or
(c) Where you have given consent to such disclosure.

Access to Personal Data

3. Except where there is an exemption provided under the Personal Data (Privacy) Ordinance, you have a right of access to and correction of personal data held about you by SWD. Your right of access under the Ordinance means the right to obtain a copy of your personal data subject to payment of a fee. Applications for access to data must be made in writing.

Enquiries, Access to and Correction of Personal Data

4. Please ensure that the data you provide to SWD are accurate. If you have enquiries concerning your application for assistance/service, or if there are changes in the data you have provided, please contact the office that collected the data from you.

5. Requests for access to personal data collected by SWD, and for correction of data obtained from a data access request, should be addressed to –

Post title : Executive Officer I (Marketing Consultancy)
Address : Room 503, 5/F, West Coast International Building,
290-296 Un Chau Street, Sham Shui Po, Kowloon
Tel. No : 3586 3594