



**G.T. (Ellen Yeung) College
Secondary Section**

**Part-time Talent Development Programs Tutor
Application Form**

優才(楊殷有娣)書院
G.T.(Ellen Yeung)College
10, Ling Kwong Street
Tiu Keng Leng
Tseung Kwan O
Tel : (852) 2535-6867
Fax: (852) 2623-6550

For Office Use

Post Applied: 2025-2026 學年兼職普通話課後提升班導師

A. PERSONAL PARTICULARS

Title <input type="checkbox"/> Dr <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms		Name in English		Name in Chinese		Recent Photo
Date of Birth (Day/Month/Year)		Age	Gender	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married with ____kids		
Nationality		<input type="checkbox"/> Hong Kong Identity Card <input type="checkbox"/> Passport Number				
Telephone Number	Home	Mobile	Work	Fax		
Correspondence Address				E-mail Address		
Permitted Teacher Reference Number (If applicable)		Teacher Registration Number (If applicable)			Religion	

B. WORKING EXPERIENCE (IN CHRONOLOGICAL ORDER)

Dates (Month/Year)		Name of Organization/Employer	*Position Held	Nature of Work/Duties
From	To			

Note. *Please indicate if it is a part-time position

C. EDUCATION AND ACADEMIC QUALIFICATIONS (IN CHRONOLOGICAL ORDER)

Dates (Month/Year) (Please state if Part-time)		Full Name & Location of Secondary & Tertiary Education Providers	Field of Study	Abbreviation (e.g., B.A, Ph.D)	Qualifications Obtained (Pls. indicate the abbreviation before description)	Date of Award (Month/Year)	Copy Verified (For Office Use)
From	To						

D. SUPPLEMENTARY INFORMATION

Expected Salary HK\$ per lesson (45 mins)	Date Available (Day/Month/Year)
Others	

E. DECLARATION

<p>a. Have you ever previously been convicted of a criminal offence in Hong Kong or elsewhere, or involved in any ongoing criminal proceedings or investigations to the best of your knowledge, including but not limited to arrest or apprehension by the police?</p> <p>b. Do you give consent to/agree to :</p> <p>Voluntarily submit application to the Sexual Conviction Record Check (SCRC) Office of the Hong Kong Police Force to undergo the SCRC, and authorize the School to access the check result through the Auto-Telephone Answering System?</p> <p>I declare that the information and documents provided in this application are, to my best knowledge, accurate and complete. I understand that my application will be disqualified if any information and document provided is found to be false.</p> <p>Signature _____ Date _____</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
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All information provided will be treated as confidential and will only be used for recruitment purpose.