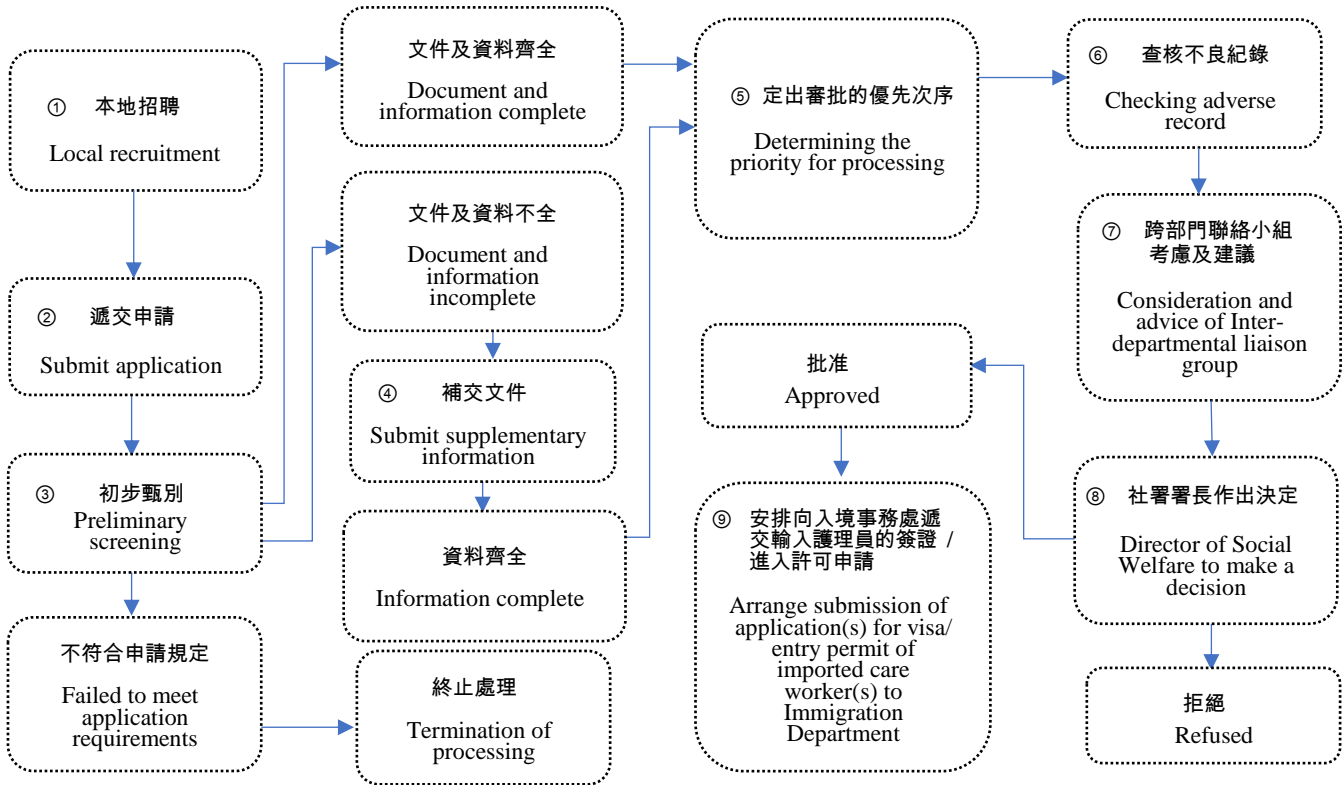


處理申請流程 Processing of an application

(詳情請參閱對應號碼的註釋。Please refer to the corresponding explanatory notes for details.)



註釋 Explanatory notes

- ① 申請者提交申請時，須證明申請院舍已經通過社會福利署（社署）署長指定途徑招聘本地護理員，但未能填補空缺。即在申請日前 30 日內，連續 14 個曆日，(i)在勞工處「互動就業服務」網站進行招聘，或(ii)在本地報章／招聘網站刊登兩則廣告招聘本地護理員。上述招聘廣告內所訂明的本地護理員薪金必須不低於輸入護理員，而輸入護理員的薪金不得低於政府統計處最新編製的護理員每月工資中位數；廣告內亦不可設有任何限制性規定或超越工作需求的不合理條件，如年齡、性別及技能等。有關本地護理員招聘廣告的規定，請參閱附件。
At the time of application, the applicant must submit proof of conducting recruitment of local care worker(s) for the residential care home (RCH) applicant through channel(s) specified by the Director of Social Welfare (“DSW”) and that the RCH had been unsuccessful in filling the vacancies. The RCH must conduct recruitment within 30 days preceding the application date, either (i) through the Interactive Employment Service website of the Labour Department (“LD”), or (ii) two recruitment advertisements published in local newspaper(s) / on recruitment website(s) to recruit local care workers, for a continuous period of 14 calendar days. The salary of local care worker(s) specified in the recruitment advertisement must not be lower than that offered to imported care workers, while the salary of the imported care worker must not be lower than the latest Median Monthly Wage of care workers as compiled by the Census and Statistics Department. There must not be unreasonable job requirements in the recruitment advertisements that are restrictive or excessive, such as age, sex and skills. For requirements on the recruitment advertisement of local care worker(s), please refer to the Annex.
- ② 申請者須在申請期內遞交填妥的申請表格（表格 SWD-ICW-1）連同該表格第 6 部分列明所需的文件。
The applicant shall submit the completed application form (Form SWD-ICW-1) together with the required documents as stated in Part 6 of the Form within the application period.
- ③ 社署會檢視申請文件及招聘本地護理員的紀錄，如不符合申請規定，申請會被終止處理。
SWD will check the application documents and records on recruitment of local care worker(s). If the requirements for the application are not met, the processing of application will be terminated.
- ④ 如申請文件或資料不齊全，社署會要求申請者在指定限期內提交有關文件或補充資料。
If the application documents or information are incomplete, SWD will request the applicant to submit the relevant documents or supplementary information within a specified period of time.

- ⑤ 申請的審批先後次序會由社署合約管理組收齊全部所需申請文件及資料的日期決定（電子方式或親身遞交的申請／資料，以遞交日期為準；郵遞方式遞交的申請／資料，以郵戳日期為準），越早交齊全部所需文件及資料的申請，會越早獲得審批。同一日遞交齊全文件及資料的申請，會由電腦隨機排序來定出各申請的審批先後次序。
The priority for processing will be determined by the date when the Contract Management Section of SWD received all the required application documents and information. (For application submitted by electronic means or in person, the date of submission will be taken; for application submitted by post, the date of postmark will be taken) The earlier the application is submitted with complete documents and information, the earlier it will be processed. Applications with complete documents and information submitted on the same day will be randomly sorted by computer to determine their priority for processing.
- ⑥ 社署會向相關政府部門查核申請者／申請院舍過往曾否有任何因僱用輸入護理員而留有任何不良紀錄。SWD will check with relevant government departments if there is any adverse record of the applicant/RCH applicant in relation to employment of imported care workers in the past.
- ⑦ 跨部門聯絡小組會考慮各申請院舍的類別、本地招聘證明及相關紀錄、全職本地僱員與輸入護理員的人數，及參加「補充勞工計劃」及「特別計劃」期間的不良紀錄等資料，就申請提供意見。
The inter-departmental liaison group will consider the type of RCH applicant, proof of local recruitment and relevant record, number of full-time local employee(s) and imported care worker(s), any adverse record of the RCH under the SLS and the Special Scheme, etc. and will give advice on the application.
- ⑧ 社署署長在考慮聯絡小組提供的意見後，並在尚未超出「特別計劃」配額的情況下，會就每宗申請作出決定。
The DSW will decide on each application after he/she considers the advice of the liaison group, provided that the quota of the special scheme is not exceeded.
- ⑨ 如申請獲得批准，申請者可安排其每名擬聘用的輸入護理員向入境事務處遞交簽證／進入許可申請。
If an application is approved, the applicant may arrange for each prospective imported care worker to submit a visa / entry permit application to the Immigration Department.

終止處理 Termination of processing

申請者必須詳細填寫申請表格(表格 SWD-ICW-1)內各適用欄目，連同該表格第 6 部分列明所需的文件一併於申請期內遞交，包括但不限於「本地招聘確認書」。如不符合申請規定，申請會被終止處理。

Please complete all the applicable items of the application form (Form SWD-ICW-1) and submit together with the required documents, including but not limited to the Confirmation Form on Local Recruitment, as stated in Part 6 of the Form within the application period. If the requirements for the application are not met, the processing of application will be terminated.

遞交申請 Application submission

申請者可將填妥的申請表格（表格 SWD-ICW-1）連同該表格第 6 部分列明所需遞交的文件以郵遞方式或親臨社署合約管理組遞交申請。申請者如 i)已獲根據《電子交易條例》（第 553 章）認可的核證機關（例如香港郵政）發出的有效機構電子證書及 ii)已啟用數碼簽署功能的「智方便」帳戶或由根據《電子交易條例》（第 553 章）（「條例」）獲認可的核證機關（例如香港郵政）發出的有效個人電子證書亦可到政府電子表格網站 (<https://eform.cefs.gov.hk/form/swd078/tc/>) 或社署網站 (https://www.swd.gov.hk/tc/index/site_pubform/)填寫電子表格及提交所需文件。

The applicant may submit the completed application form (Form SWD-ICW-1) and the required documents in accordance with Part 6 of the form by mail or by hand to the Contract Management Section of SWD. If the applicant has i) a valid organisational digital certificate issued by recognised certification authorities under the Electronic Transactions Ordinance (ETO) (Cap. 553) in Hong Kong, e.g. Hongkong Post; and ii) an 'iAM Smart' account with digital signing function or a valid personal digital certificate issued by recognised certification authorities for authentication under the ETO, e.g. Hongkong Post, he/she could fill in the electronic form and submit the required documents on the government electronic form website (<https://eform.cefs.gov.hk/form/swd078/en/>) or on the SWD website (https://www.swd.gov.hk/en/index/site_pubform/).

社署合約管理組地址

香港灣仔愛群道 44 號
戴麟趾夫人訓練中心 3 樓 306 室
社會福利署
合約管理組(愛群道辦事處)

查詢熱線：3468 3923

Address of the Contract Management Section of SWD

Contract Management Section (Oi Kwan Road Office)
Social Welfare Department
Rm 306, 3/F, Lady Trench Training Centre,
Oi Kwan Road,
Wanchai, Hong Kong

Enquiry Hotline: 3468 3923

「院舍輸入護理員特別計劃」
Special Scheme to Import Care Workers for Residential Care Homes

本地護理員招聘廣告的規定
Requirements on the Recruitment Advertisement of Local Care Worker(s)

- (1) 請於「院舍輸入護理員特別計劃」申請表內填寫的申請日期前30日內，連續14個曆日，(i) 在勞工處「互動就業服務」網站進行招聘，或(ii)在本地報章／招聘網站刊登兩則招聘本地護理員的廣告。有關刊登日期的例子如下：

Please conduct recruitment of local care worker(s) within 30 days prior to completing the application form of “Special Scheme to Import Care Workers for Residential Care Homes” either (i) through the Interactive Employment Service website of the Labour Department (“LD”), or (ii) two recruitment advertisements published in local newspaper(s) / on recruitment website(s), for a continuous period of 14 calendar days. Example of publishing period is as follows:

例如：申請日期為 2023 年 9 月 28 日 e.g. Application date is 28 September 2023		
廣告 Advertisement	刊登期 Publishing Period	連續 14 個曆日的招聘廣告必須於 2023 年 8 月 29 日至 2023 年 9 月 27 日期間刊登 Recruitment advertisements for a continuous period of 14 calendar days must have been published between 29 August 2023 and 27 September 2023.
	刊登媒介 Publishing Media	勞工處「互動就業服務」網站，或 本地報章/招聘網站刊登兩則廣告 Interactive Employment Service website of LD, or Local newspaper(s) / on recruitment website(s)

- (2) 上述招聘廣告內所訂明的本地護理員薪金必須不低於輸入護理員，而輸入護理員的薪金不得低於政府統計處最新編製的護理員每月工資中位數；廣告內亦不可設有任何限制性規定或超越工作需求的不合理條件，如年齡、性別及技能等。請注意，招聘廣告內必須包括下列各項資料：

The salary of local care workers specified in the recruitment advertisement must not be lower than that offered to imported care workers while the salary of imported care workers must not be lower than the latest Median Monthly Wage of care workers as compiled by the Census and Statistics Department. There must not be unreasonable job requirements in the recruitment advertisements that are restrictive or excessive, such as age, sex and skills. Please note that recruitment advertisements must include the following information:

內容 Content	注意事項 Points to note	須包括的資料／例子 Information/Examples to be included
1. 職位名稱 Job Title	所刊登的職位名稱必須與是次申請的資料相同。 The job title published must be the same as the information provided in the application.	即：護理員 Namely: Care worker

<p>2. 工作地區 Work Location</p>	<p>須刊登工作地點所屬地區。 must indicate the district of the work place</p>	<p>例如：元朗區、旺角區 e.g. Yuen Long, Mongkok</p>
<p>3. 工作時間 Working Schedule</p>	<p>請列明工作時間；如需輪班，則請註明各班的工作時間。 Please specify the working schedule; if shifts are required, please indicate the working schedule of each shift</p>	<p>例如： (1) 朝 8 晚 6，不需輪班，1 小時用膳，每天 9 小時工作^{註 1}，每星期工作 6 天 <i>註 1：此工作時數應為扣除休息時間後的實際工作時數。</i> e.g. From 8am to 6pm, shift not required, one-hour meal break, 9 working hours a day^{Note 1}, 6 working days a week. <i>Note 1: This number of working hours should be the actual number of working hours after deducting rest breaks.</i></p>
<p>4. 入職要求 Entry Requirement</p>	<p>須列明入職要求，如學歷、語文能力、相關經驗及技能等。 The entry requirements must be listed out, such as education standard, language ability, relevant experience and skills, etc.</p>	<p>例如：小學程度，能讀寫中文，能操簡單粵語與院友溝通，有一年或以上照顧經驗為佳。 e.g. primary school level, can read and write Chinese, can speak simple Cantonese to communicate with residents of residential care home, preferably with one year or more caring service experience.</p>
<p>5. 月薪 Monthly Salary</p>	<p>所刊登的工資不得低於政府統計處最新編製的護理員每月工資中位數。 The salary of local care worker(s) published in the recruitment advertisement must not be lower than the latest Median Monthly Wage of care workers as compiled by the Census and Statistics Department.</p>	<p>例如：每月\$16,000^{註 2} <i>註 2：此月薪以每週工作 6 天，每天工作 9 小時不包括休息/用膳時間計。</i> e.g. \$16,000 monthly^{Note 2} <i>Note 2: This monthly salary is based on 6 working days a week with 9 working hours per day (excluding meal/rest breaks).</i></p>
<p>6. 聯絡方法 Contact Means</p>	<p>可聯絡的電話號碼。 Phone number that can be reached</p>	<p>請於廣告內註明：“求職者請致電 xxxx-xxxx 查詢。” Please indicate in the advertisements: “For enquiries, please call xxxx_xxxx.”</p>

「院舍輸入護理員特別計劃」申請表 Special Scheme to Import Care Workers for Residential Care Homes Application Form

第 1 部分：重要事項

Part 1: Important Notes

1. 填寫本表格前請參閱《「院舍輸入護理員特別計劃」申請須知》。為免本申請受到延誤，請以黑色筆及正楷填寫本表格。
1. Please read the "Special Scheme to Import Care Workers for Residential Care Homes – Points to Note" before completing this form. For the avoidance of delay in the processing of this application, please write in black ink and in block letters.
2. 社會福利署收集個人／申請者資料的目的是用以處理根據「院舍輸入護理員特別計劃」（「特別計劃」）提出的申請及執行「特別計劃」的規定。社會福利署會將收集的個人／申請者資料轉交勞工處、入境事務處、相關決策局及其他政府部門，以作上述用途。申請者向社會福利署提供任何人的個人資料必須出於自願，但倘若申請者不向社會福利署提供充足資料，則社會福利署可能會因此而未能處理本申請。有關資料當事人有權要求查閱及更改其被提供的個人資料。如欲要求查閱或更改其個人資料，可聯絡九龍深水埗元州街 290-296 號西岸國際大廈 6 樓社會福利署合約管理組總社會工作主任（合約管理）。
2. The purposes of collecting personal/the applicant's data are to process applications under the Special Scheme to Import Care Workers for Residential Care Homes (Special Scheme) and enforce the terms and conditions of the Special Scheme. The data will be transferred to the Labour Department, the Immigration Department, relevant policy bureaux and other government departments for the purposes mentioned above. The provision of personal data should be voluntary. However, if the applicant does not provide sufficient information as requested, Social Welfare Department (SWD) may not be able to process this application. Persons whose personal data have been provided to SWD have the right to request for access to and correction of their personal data. Request for access to or correction of personal data should be made to, Chief Social Work Officer (Contract Management), Contract Management Section, Social Welfare Department, 6/F, West Coast International Building, 290-296 Un Chau Street, Sham Shui Po, Kowloon.

第 2 部分：僱主應做與不應做事項一覽表

Part 2: List of Dos and Don'ts for Employers

(1) 有關《入境條例》 In relation to the Immigration Ordinance

不應做 Don'ts

- ✘ 聘用不能合法在港工作的人士
Employ persons not lawfully employable in Hong Kong
- ✘ 令輸入護理員在違反標準僱傭合約(標準合約)或逗留條件的情況下工作
Cause imported care workers to work in violation of the Standard Employment Contract (SEC) or condition of stay
- ✘ 協助及教唆他人違反逗留條件
Aid and abet others in breach of condition of stay
- ✘ 協助及教唆非本地人提供失實聲明／文件
Aid and abet non-local persons to make false statements/documents

(2) 有關勞工法例 In relation to labour laws

應做 Dos

- ✓ 按照《僱傭條例》的相關規定支付工資給輸入護理員
Pay wages to imported care workers according to relevant provisions of the Employment Ordinance
- ✓ 給予輸入護理員休息日／休息日薪酬
Grant rest day / pay rest day pay to imported care workers
- ✓ 給予輸入護理員法定假日／法定假日薪酬
Grant statutory holiday / pay statutory holiday pay to imported care workers
- ✓ 給予輸入護理員年假／年假薪酬
Grant annual leave / pay annual leave pay to imported care workers
- ✓ 給予輸入護理員產假／產假薪酬
Grant maternity leave / pay maternity leave pay to imported care workers
- ✓ 給予輸入護理員侍產假／侍產假薪酬
Grant paternity leave / pay paternity leave pay to imported care workers
- ✓ 支付疾病津貼給輸入護理員
Pay sickness allowance to imported care workers
- ✓ 按照《僱傭條例》的相關規定向輸入護理員支付約滿或終止僱傭合約的款項
Make payment to imported care workers on completion or termination of employment contract according to relevant provisions of the Employment Ordinance
- ✓ 支付根據勞資審裁處或小額薪酬索償仲裁處的判令中所須支付的相關款項給輸入護理員
Make payment to imported care workers pursuant to awards of the Labour Tribunal or the Minor Employment Claims Adjudication Board
- ✓ 保存輸入護理員的工資及僱傭紀錄
Keep wage and employment records of imported care workers
- ✓ 為輸入護理員投購有效僱員補償保險
Take out valid employees' compensation insurance policy for imported care workers
- ✓ 展示一份符合《僱員補償條例》指明格式的保險通告 (LD 375)
Display a notice of insurance (LD 375) in such form as specified in relevant provisions of the Employees' Compensation Ordinance
- ✓ 支付按期款項及僱員補償給因工受傷的輸入護理員
Pay periodical payment and employees' compensation to imported care workers who sustained injuries at work
- ✓ 遵守職業安全及健康法例
Comply with occupational safety and health legislation
- ✓ 遵守《強制性公積金計劃條例》
Comply with the Mandatory Provident Fund Schemes Ordinance

不應做 Don'ts

- ✘ 不合法扣除輸入護理員的工資
Deduct the wages of imported care workers unlawfully
- ✘ 於輸入護理員有薪病假期間終止其僱傭合約
Terminate the employment contract of imported care workers whilst they are on paid sick leave
- ✘ 在違反《僱員補償條例》的情況下，終止因工受傷的輸入護理員的僱傭合約
Terminate the employment contract of imported care workers who sustained injuries at work, in breach of the Employees' Compensation Ordinance

(3) 有關標準合約及「特別計劃」的規定**In relation to requirements of Standard Employment Contract (SEC) and the Special Scheme****應做 Dos**

- ✓ 按標準合約的規定給予輸入護理員超時工作工資
Make payment of overtime pay to imported care workers at a rate as stipulated in SEC
- ✓ 以自動轉賬形式支付輸入護理員的工資
Effect payment of wages to imported care workers through autopay
- ✓ 就每份所簽訂的標準合約，給予輸入護理員有薪假期，讓他們在抵港後8個星期內出席由勞工處舉辦的簡介會
Grant imported care workers paid leave and arrange them, on the basis of each SEC signed, to attend a briefing organised by the Labour Department within 8 weeks upon their arrival in Hong Kong
- ✓ 向輸入護理員提供符合標準合約附表所註明標準的住宿及設備
Provide imported care workers with accommodation in accordance with the standard as stipulated in the Schedule to SEC
- ✓ 向在有關標準合約指明受僱期內生病或受傷的輸入護理員提供免費醫療
Provide imported care workers with free medical treatment if they are ill or suffer personal injuries during the period of employment specified in SEC
- ✓ 向輸入護理員提供、支付或付還其自原居地到香港及於僱傭合約終止或屆滿時返回原居地的旅費、到港前的體格檢驗費用、簽證／進入許可費用及之後的延期費用
Provide, pay or reimburse passage expenses, medical examination expenses before arriving Hong Kong, visa/entry permit fees and subsequent extension fees to imported care workers

不應做 Don'ts

- ✘ 以輸入護理員取代原來在職的本地工人
Displace local worker(s) in employ by imported care worker(s)
- ✘ 與輸入護理員訂立任何協議，要求輸入護理員將全部或部分工資或輸入護理員根據標準合約有權得到的任何款項交回予僱主，或從輸入護理員索取或接受該等回扣
Make any agreement with imported care workers requiring them to surrender all or part of the wages or any sum to which they are entitled under SEC, or demanding or receiving any such rebate from them
- ✘ 扣減輸入護理員的工資，用以繳付他們欠下原居地機構或代理人的款項或費用，或用以抵消僱主須支付的僱員再培訓徵款
Make deductions from imported care workers' wages for the purpose of paying any dues or fees charged on the worker by authorities or agents in the worker's country of origin, or of offsetting the Employees Retraining Levy required to be paid by the employer

- ✘ 於輸入護理員懷孕期間，非法終止其僱傭合約
Terminate the employment contract of imported care workers during their pregnancy unlawfully
- ✘ 因輸入護理員參與職工會或職工會的活動而終止其僱傭合約
Terminate the employment contract of imported care workers for trade union membership and activities
- ✘ 因輸入護理員曾在有關執行《僱傭條例》、因工遭遇意外或違反工作安全法例而進行的法律程序中提供證據或向進行查訊的公職人員提供資料而終止其僱傭合約
Terminate the employment contract of imported care workers by reason of giving evidence or information in any proceedings or inquiry in connection with the enforcement of the Employment Ordinance, work accidents or breach of work safety legislation

- ✓ 如輸入護理員死亡，支付將其遺體及個人物品運返其原居地的費用
Pay the cost of transporting imported care workers' remains and personal property to their place of origin in the event of death
- ✓ 免費給予輸入護理員一份經雙方簽署的僱傭合約
Give imported care workers a copy of the signed employment contract free of charge
- ✓ 每月向每名輸入護理員提供一份有關其收入詳情的結算表
Provide each imported care worker, on a monthly basis, with a detailed breakdown of his/her earnings
- ✓ 製備輸入護理員認收工資結算表清單
Prepare an acknowledgment list of wage information of imported care workers
- ✓ 製備輸入護理員認收僱傭合約紀錄，並於其抵港後2個星期內送交社會福利署
Prepare and send to the Social Welfare Department, within 2 weeks upon their arrival in Hong Kong, an acknowledgment record of employment contracts of imported care workers

- ✘ 就所提供的住宿而扣除輸入護理員的工資超逾標準合約的規定
Make deductions from imported care workers' wages for provision of accommodation at a rate which is over the contractual rate
- ✘ 令輸入護理員的工作時數超逾標準合約所規定的上限
Cause imported care workers to work exceeding the ceiling of the working hours as specified in SEC
- ✘ 扣押輸入護理員的香港身份證／護照／往來港澳通行證／銀行存摺／自動櫃員機卡
Withhold Hong Kong Identity Card(s) / passport(s) / Exit-entry Permit(s) for Travelling to and from Hong Kong and Macao / bank book(s) / automatic teller machine card(s) of imported care workers
- ✘ 就所提供的膳食向輸入護理員收取費用
Charge imported care workers meal cost for the meal provided
- ✘ 拒絕社會福利署或勞工處職員進入和視察輸入護理員的居所
Refuse the entry and inspection by officers of the Social Welfare Department or Labour Department to imported care workers' accommodation

註：如僱主、或僱主的獨資經營者／合夥人違反相關條文或規定，其所獲得的輸入護理員批准可能被撤銷，以及在指定時間內不得參與「特別計劃」。

Note: The approval for importation of care workers granted to an employer may be withdrawn if the employer, or the sole proprietor/partner(s) of the employer has/have breached relevant provision(s) or requirement(s). The employer will also be debarred from participation in the **Special Scheme** within a specified period of time.

第 3 部分：申請者資料

Part 3: Applicant's Particulars

申請者名稱 (指業務/法團名稱及業務/分行名稱 (如適用)) ⁽¹⁾ Name of applicant (refers to name of business/corporation and business/branch name (if applicable)) ⁽¹⁾	(中文)									
	(English)									
商業登記證號碼 (如適用) Business Registration Certificate no. (if applicable)	_____ ➔ (如持有商業登記證, 請在本表格第 6 部分 <input type="checkbox"/> (a) 加上“✓”號。 For holders of Business Registration Certificate, please put “✓” in <input type="checkbox"/> (a) in Part 6 of this form.)									
申請者類別 Type of applicant	<input type="radio"/> 獨資經營 Sole proprietorship ➔ (請在本表格第 6 部分 <input type="checkbox"/> (b) 加上“✓”號。 Please put “✓” in <input type="checkbox"/> (b) in Part 6 of this form.) <input type="radio"/> 合夥經營 Partnership (合夥人數目 Number of partners _____) ➔ (請在本表格第 6 部分 <input type="checkbox"/> (b) 及 <input type="checkbox"/> (e) 加上“✓”號。 Please put “✓” in <input type="checkbox"/> (b) and <input type="checkbox"/> (e) in Part 6 of this form.) <input type="radio"/> 有限公司 Limited company 公司註冊證明書號碼 Certificate of Incorporation no. _____ ➔ (請在本表格第 6 部分 <input type="checkbox"/> (c) 加上“✓”號 Please put “✓” in <input type="checkbox"/> (c) in Part 6 of this form.) <input type="radio"/> 法人團體 (包括非政府機構) Body Corporate (including a non-governmental organization (NGO)) 法團註冊證明書號碼 Certificate of Incorporation no. _____ ➔ (請在本表格第 6 部分 <input type="checkbox"/> (d) 及 <input type="checkbox"/> (e) 加上“✓”號 Please put “✓” in <input type="checkbox"/> (d) and <input type="checkbox"/> (e) in Part 6 of this form.)									
院舍牌照類別 Type of residential care home licence	<input type="radio"/> 安老院 Residential Care Home for the Elderly (RCHE) 牌照處檔號 LORCHE No.: _____ <input type="radio"/> 殘疾人士院舍 Residential Care Home for Persons with Disabilities (RCHD) 牌照處檔號 LORCHD No.: _____ <input type="radio"/> 護養院 Nursing Home (NH) 私營醫療機構編號 PHF No.: _____									
院舍營運模式 Operation mode of residential care home	<input type="radio"/> 津助院舍 Subvented home <input type="radio"/> 自負盈虧院舍 Self-financing home <input type="radio"/> 合約院舍 Contract home <input type="radio"/> 私營院舍(包括買位院舍) Private home (including Enhanced Bought Place Scheme home)									
院舍床位數目 Number of beds of residential care home	_____									
院舍名稱 Name of residential care home	(中文) _____ (English) _____									
院舍地址 ⁽²⁾ Address of residential care home ⁽²⁾	(中文) _____ (English) _____									
申請者負責人姓名 ⁽³⁾ Name of the person-in-charge ⁽³⁾	<table border="1"> <tr> <td data-bbox="330 1736 991 1812"> <input type="radio"/> 女士⁽⁴⁾ Ms⁽⁴⁾ <input type="radio"/> 先生⁽⁴⁾ Mr⁽⁴⁾ </td> <td data-bbox="995 1736 1220 1812"> 電話號碼 Tel. no. </td> <td data-bbox="1225 1736 1525 1812"> _____ </td> </tr> <tr> <td data-bbox="330 1812 991 1877"></td> <td data-bbox="995 1812 1220 1877"> 傳真號碼 Fax no. </td> <td data-bbox="1225 1812 1525 1877"> _____ </td> </tr> <tr> <td data-bbox="330 1877 991 1935"></td> <td data-bbox="995 1877 1220 1935"> 電郵 Email </td> <td data-bbox="1225 1877 1525 1935"> _____ </td> </tr> </table>	<input type="radio"/> 女士 ⁽⁴⁾ Ms ⁽⁴⁾ <input type="radio"/> 先生 ⁽⁴⁾ Mr ⁽⁴⁾	電話號碼 Tel. no.	_____		傳真號碼 Fax no.	_____		電郵 Email	_____
<input type="radio"/> 女士 ⁽⁴⁾ Ms ⁽⁴⁾ <input type="radio"/> 先生 ⁽⁴⁾ Mr ⁽⁴⁾	電話號碼 Tel. no.	_____								
	傳真號碼 Fax no.	_____								
	電郵 Email	_____								
申請者負責人職銜 Job title of the person-in-charge	_____ ➔ (如負責人並非獨資經營者/董事/獲授權合夥人/獲法人團體(包括非政府機構)授權的代表, 請在本表格第 6 部分 <input type="checkbox"/> (f) 加上“✓”號。 If the person-in-charge is not the sole proprietor/director/authorised partner/authorised representative of applicant, please put “✓” in <input type="checkbox"/> (f) in Part 6 of this form.)									

現時院舍所有全職本地僱員人數 ⁽⁵⁾ No. of all existing full-time local employee(s) ⁽⁵⁾ of the residential care home		現時輸入護理員人數 ⁽⁶⁾ No. of existing imported care worker(s) ⁽⁶⁾ _____	➢ 補充勞工計劃 Supplementary Labour Scheme : _____ ➢ 「特別計劃」 The Special Scheme : _____ ➔ (如有, 請在本表格第 6 部分 <input type="checkbox"/> (j) 及 <input type="checkbox"/> (k) 加上“✓”號。如沒有, 請填 “0”。 If yes, please put “✓” in <input type="checkbox"/> (j) and <input type="checkbox"/> (k) in Part 6 of this form. If no, please fill in “0”)
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- (1) 請填寫商業登記證或院舍牌照上獲發申請院舍牌照人士/公司/法團的資料。Please fill in information of person/company/corporation to whom /which the license is issued in respect of the residential care home applicant as stated on the Business Registration Certificate or residential care home licence.
- (2) 請填寫院舍牌照/附表護養院豁免書上的院舍地址。Please fill in the address of the residential care home on the licence of residential care home / letter of exemption for scheduled nursing home.
- (3) 有關資料用途, 請參閱本表格第 1 部分。社會福利署職員會接觸申請者的負責人, 以處理本申請。為免本申請受到延誤, 社會福利署職員將以電話、傳真及電郵等方式與申請者的負責人聯絡。Please see Part 1 of this form for the use of the information. Staff of SWD will contact the person-in-charge for the purposes of processing this application. For the avoidance of delay in the processing of this application, staff of SWD will communicate with the person-in-charge by telephone, facsimile and email, etc.
- (4) 此稱謂只作通訊及聯絡之用。This prefix is for the purpose of correspondence and communication only.
- (5) 由申請者直接僱用以經營本表格第 3 部分所列明院舍的所有全職本地僱員(包括院舍所有工種), 不包括申請者就其他業務僱用的僱員、向申請者提供服務的外判商員工或自僱人士。All full-time local employees (including all types of staff of the residential care home) under direct employment of the applicant for the residential care home specified in Part 3 of this form, excluding those employed for other businesses of the applicant, staff of sub-contractor(s) or self-employed person(s) providing service to the applicant.
- (6) 包括現時在職及已獲「補充勞工計劃」原則性批准輸入/「特別計劃」的配額但仍未抵港的輸入護理員。Including those imported care workers who are in employ and those covered by approval-in-principle for importation under Supplementary Labour Scheme / quota(s) granted under the Special Scheme but have not arrived in Hong Kong yet.
- 請在適當的圈內加上“✓”號。Please put “✓” in suitable circles.

第 4 部分：過往不良紀錄

Part 4: Past Adverse Record

申請者、或申請者的獨資經營者/合夥人有沒有違反本表格第 2 部分列明的法例或規定？(如申請者是有限公司或法團, 只需填報與該公司或法團有關的紀錄。)

Has the applicant, or the sole proprietor/partner(s) of the applicant violated any law or requirement listed in **Part 2** of this form? (For a limited company or corporation, only record(s) pertaining to that company or corporation need(s) to be provided.)

沒有。No.

有。詳情如下(請列明違反的法例或規定, 以及定罪或警誡信/制裁通知書日期)：

Yes. The details are as follows (please state the law or requirement violated, and the date of conviction or the date of the warning letter/sanction notification) :

違反的法例或規定 The law or requirement violated	定罪日期 Date of conviction	警誡信/制裁通知書日期 Date of the warning letter / sanction notification

請在適當的圈內加上“✓”號。Please put “✓” in suitable circles.

第 5 部分：職位詳情

Part 5: Details of the Post

職位名稱 Job title	護理員 (安老院/殘疾人士院舍/護養院*) Care worker (Residential Care Home for the Elderly / Residential Care Home for Persons with Disabilities / Nursing Home*)	申請輸入護理員人數 No. of imported care worker(s) applied for	僱用期(月) ⁽⁷⁾ Employment period (months) ⁽⁷⁾
工資 Wages offered			
每月 \$ _____ 元 (不包括超時工資)			
HK\$ _____ per month (excluding overtime pay)			

工作時間(扣除休息/用膳時間) Work schedule (excluding meal / rest breaks) 請於(A)或(B)項中選擇其一 Please choose either (A) or (B)	
<input type="radio"/> (A) 不需輪班工作，每週工作日數：_____，正常工作時數（用膳時間除外）為每天_____小時。 Shift work not required, normal days of work shall be _____ days per week and normal hours of work excluding meal break shall be _____ per day. 每天工作時間如下 Daily work schedule as follows : (例 e.g.: 9:00 - 13:00 & 14:00 - 17:00) _____	<input type="radio"/> (B) 需輪班工作，每週工作日數：_____，正常工作時數（用膳時間除外）為每天_____小時。 Shift work required, normal days of work shall be _____ days per week and normal hours of work excluding meal break shall be _____ per day. 各班工作時間如下 Work schedule of each shift as follows : (例 e.g.: 9:00 - 13:00 & 14:00 - 17:00; 11:00 - 15:00 & 16:00 - 19:00) _____ _____ _____

職務範圍 Job description

- 照顧院舍住客日常生活起居，包括餵食、扶抱、位置轉移、轉身等
Assist residents of the residential care home with activities of daily living, including feeding, lifting, transfer, turning, etc
- 協助院舍住客的個人衛生護理，包括洗澡、如廁、換片、牙齒及口腔護理、刷牙、洗頭、剪髮、穿脫衣服和整理儀容、剃鬚、修剪指甲等
Provide personal care to residents of the residential care home, including bathing, toileting, diaper changing, dental and oral care, teeth brushing, hair washing, hair cutting, dressing and grooming, shaving, nail trimming, etc
- 為院舍住客陪診及送診
Accompany / escort residents of the residential care home to visit clinics or hospitals

語文要求 Language requirement

(會話 Spoken)		(讀寫 Reading & writing)	
粵語 Cantonese	<input type="radio"/> 無需 Nil <input type="radio"/> 一般 Fair <input type="radio"/> 略懂 Little	中文 Chinese	<input type="radio"/> 無需 Nil <input type="radio"/> 一般 Fair <input type="radio"/> 略懂 Little
英文 English	<input type="radio"/> 無需 Nil <input type="radio"/> 一般 Fair <input type="radio"/> 略懂 Little	英文 English	<input type="radio"/> 無需 Nil <input type="radio"/> 一般 Fair <input type="radio"/> 略懂 Little
其他語言 Others _____	<input type="radio"/> 無需 Nil <input type="radio"/> 一般 Fair <input type="radio"/> 略懂 Little	其他語文 Others _____	<input type="radio"/> 無需 Nil <input type="radio"/> 一般 Fair <input type="radio"/> 略懂 Little

最低入職要求 Minimum entry requirements

學歷 Education standard	<input type="radio"/> 無需 Nil	相關經驗 Relevant experience	<input type="radio"/> 無需 Nil
	<input type="radio"/> 小學 Primary level _____ 年級		<input type="radio"/> 相關經驗 Relevant experience: _____ (年 year)
	<input type="radio"/> 中學 Secondary level _____ 年級	技能及其他要求 Skill and other requirement(s)	<input type="radio"/> 無需 Nil
	<input type="radio"/> 其他，請闡述 Others, please specify: _____		<input type="radio"/> 請闡述 Please specify: _____

工作地址⁽⁸⁾ Address of work place ⁽⁸⁾	<input type="radio"/> 工作地址與本表格第 3 部分所列明院舍地址相同（即牌照/附表護養院豁免書上的院舍地址）。 Address of work place is same as residential care home address in Part 3 of this form (i.e. the residential care home address on the licence/ letter of exemption for scheduled nursing home).
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(7) 根據「特別計劃」輸入的護理員，合約期最長為 24 個月，合約完結後不會自動續約。The maximum length of employment period of an imported care worker under the Special Scheme is 24 months and the contract will not be renewed automatically upon expiry.

(8) 因工作地址必須與牌照/附表護養院豁免書上的院舍地址相同，申請者須在○圈內加上“✓”號，即填寫了與本表格第 3 部分所列明院舍地址為工作地址。As the address of work place must be same as the residential care home address on the licence/letter of exemption for scheduled nursing home, the applicant must put “✓” in the circle, that is, fill in the residential care home address listed in the Part 3 of this form as the address of work place.

請在適當的圈內加上“✓”號。Please put “✓” in suitable circles.

* 請刪去不適用者。Please delete where inappropriate.

第 6 部分：聲明**Part 6: Declaration**

1. 本人已填妥此申請表（表格 SWD-ICW-1）根據「特別計劃」提出申請，並隨此申請表遞交以下文件。
I have completed this form (Form SWD-ICW-1) to make application under the Special Scheme and submitted together with this form the following documents.

請在下表的合適 加上“✓”號。Please put “✓” in appropriate of the below table.

<input type="checkbox"/> (a)	商業登記證副本 Copy of the Business Registration Certificate
<input type="checkbox"/> (b)	載列包括獨資經營者／所有合夥人資料的最新「商業登記冊內資料的摘錄的核證本」副本一份及以書面確認所提供的核證本為最新版本 Copy of the latest “Certified Extracts of Information on the Business Register” setting out information of the sole proprietor/all partners and a written confirmation specifying that the copy of certified extracts provided is the most updated version
<input type="checkbox"/> (c)	有限公司註冊證明書副本一份 Copy of the Certificate of Incorporation
<input type="checkbox"/> (d)	法團註冊證明書副本一份 Copy of Certification of Incorporation
<input type="checkbox"/> (e)	由獨資經營者／有限公司／合夥經營／法人團體（包括非政府機構）授權合夥人或申請者代表簽署本申請表的授權書 An authorisation letter from sole proprietor/limited company/partnership/body corporate (including an NGO) to authorise a partner or representative of the applicant to sign this application
<input type="checkbox"/> (f)	由獨資經營者／董事／獲授權合夥人／法人團體申請者代表（包括非政府機構）簽署及申請者蓋印，授權負責人遞交及處理此申請的授權書 An authorisation letter signed by sole proprietor/director/authorised partner/authorised representative of body corporate (including an NGO) with the applicant's chop to authorise the person-in-charge to submit and handle this application
<input checked="" type="checkbox"/> (g)	院舍牌照／附表護養院豁免書的副本 Copy of residential care home licence/letter of exemption for scheduled nursing home
<input checked="" type="checkbox"/> (h)	本地招聘確認書（附件一） Confirmation Form on Local Recruitment (Annex 1)
<input checked="" type="checkbox"/> (i)	院舍全職本地僱員資料報表（附件二） Information of Full-time Local Employees of Residential Care Home (Annex 2)
<input type="checkbox"/> (j)	現職輸入護理員名單（附件三） List of In-employ Imported Care Workers (Annex 3)
<input type="checkbox"/> (k)	已獲「補充勞工計劃」原則性批准輸入 / 「特別計劃」配額但有關輸入護理員（包括替補輸入護理員）仍未到港報表（附件四） List of the imported care workers (including replacement of imported care workers) not yet arrived in Hong Kong while approval-in-principle for importation under Supplementary Labour Scheme / quota(s) under the Special Scheme have been granted (Annex 4)

2. 本人確認已細閱本表格**第 1 部分**，並保證所有已提交的及將來提交的文件及資料均屬真實和正確。如在提交任何資料後，有關資料有任何更改，本人將盡快主動通知社會福利署合約管理組。本人亦確認申請者進行的一切活動皆為合法。

I confirm that I have read **Part 1** of this form and that all the information submitted and to be submitted in future is true and accurate. I shall take the initiative to inform the Contract Management Section of SWD as soon as possible of any changes in any information after it is submitted. I also confirm that all activities carried out by the applicant are lawful.

3. 本人聲明本人提交上述職位空缺的招聘條件及入職要求（包括語文能力要求，如有此等要求）等，及其往後之修改，皆與有關職位相關並有合理可據，且沒有違反香港法例第 480 章《性別歧視條例》、香港法例第 487 章《殘疾歧視條例》、香港法例第 527 章《家庭崗位歧視條例》及香港法例第 602 章《種族歧視條例》。本人明白，若我明知而作出或罔顧實情地作出虛假或有誤導性的陳述，即屬違法及可被檢控。

I hereby declare that the terms of employment and entry requirements (including requirement on language proficiency, if any) etc. of the above post(s) and any amendments thereafter are relevant, justifiable and do not violate the Sex Discrimination Ordinance, Cap. 480, the Disability Discrimination Ordinance, Cap. 487, the Family Status Discrimination Ordinance, Cap. 527, and the Race Discrimination Ordinance, Cap. 602. I understand that it is an offence and I will be liable to prosecution if I knowingly or recklessly make a statement which is false or misleading.

4. 簽署此部份後，即表示本人／申請者：

By signing this Part, I / the applicant:

- (i) 明白須就申請向社會福利署提交一切所需的資料及文件，否則社會福利署不會處理本申請；

understands that SWD will not process this application unless and until all the information and supporting documents required are provided to SWD;

- (ii) 確認在提交任何個人資料予社會福利署前，有關資料當事人於提供其個人資料前已閱讀、完全明白及同意本表格第 1 部分第 2 段；

confirms that in connection with any personal data to be submitted, the data subjects have read, fully understood and agreed with paragraph 2 in Part 1 of this form before they provide their personal data;

- (iii) 確認已細閱及承諾遵照本表格第 2 部分列明的法例及規定，並明白若違反相關法例或規定，申請者將會被撤銷所獲輸入護理員的批准，以及在指定時間內不得參與「特別計劃」；及

confirms that having read **Part 2** of this form, I / the applicant undertakes to comply with the laws and requirements listed therein, and understands that a breach of relevant law(s) or requirement(s) will render any approval granted to the applicant for importation of care worker(s) be withdrawn and that the applicant be debarred from participating in the Special Scheme within a specific period of time; and

- (iv) 確認在此文件內提供的資料屬真實及正確。本人明白如本人蓄意或存心提出不正確資料或隱瞞任何事項，或錯誤引導社會福利署，社會福利署會終止處理本申請及在指定時間內不會接受本院舍的配額申請，本人亦須負上有關的法律責任。

confirms that all information furnished here is true and accurate. I understand that if I knowingly or wilfully make any false statement or withhold any information, or otherwise mislead the Social Welfare Department, the Social Welfare Department will terminate the processing of this application and will not accept any quota application of our residential care home within a specified period of time, and also I shall bear the legal responsibilities.

獨資經營者／董事／獲授權合夥人／
獲授權代表*簽署

Signature of sole proprietor/director/
authorised partner/authorised representative*

(* 請刪去不適用者。Please delete where inappropriate)

_____)
(姓名 Name

申請者蓋印
Applicant's chop

日期 Date _____

致：社會福利署合約管理組

To: Contract Management Section, Social Welfare Department

「院舍輸入護理員特別計劃」
本地招聘確認書

**Special Scheme to Import Care Workers for Residential Care Homes
Confirmation Form on Local Recruitment**

院舍名稱 Name of Residential Care Home: _____

牌照處檔號／私營醫療機構編號*LORCHE/LORCHD/PHF* No.: _____
(*請刪去不適用者。*Please delete where inappropriate)

關於本院舍根據「院舍輸入護理員特別計劃」(「特別計劃」)提出的輸入護理員配額申請，現確認如下(請在適當□中加上“✓”號)：

In connection with the application of our residential care home for quota to import care worker(s) under the Special Scheme to Import Care Workers for Residential Care Homes (“Special Scheme”), we confirm that (Please put “✓” in appropriate □)：

本院舍已按「特別計劃」規定，在申請日前 30 日內，連續 14 個曆日，即由 _____ 至 _____。

In accordance with the requirement of the Special Scheme, our residential care home has conducted local recruitment for a continuous period of 14 calendar days within 30 days preceding the application date, from _____ to _____.

- 在勞工處「互動就業服務」網站進行本地招聘。
through the Interactive Employment Service website of the Labour Department.
- 在本地報章／招聘網站刊登兩則本地招聘的廣告。
with two recruitment advertisements published in local newspaper(s) / on recruitment website(s).

上述招聘廣告內所刊登護理員職位月薪為港幣_____。

The monthly salary for the care worker post as advertised in the above recruitment advertisement is HK\$_____.

在上述本地招聘期間共有_____名(如沒有，請填“0”)求職者應徵護理員職位，現於「**招聘本地護理員紀錄表**」提供有關招聘結果資料，以便貴署參考。
During the local recruitment period as mentioned above, _____ job-seeker(s) (If nil, please fill in “0”) has / have applied for the post(s) of care worker. The information of recruitment result is provided in the “**Record Form on Recruitment of Local Care Workers**” for your reference.

本人明白社會福利署可能會要求本院舍提交個別求職者應聘的詳細資料（包括應徵紀錄和面試紀錄），並聯絡求職者以查核招聘紀錄。本院舍已徵詢求職者同意向社會福利署透露其個人資料。對於拒絕給予同意的求職者，本院舍向社會福利署提交招聘紀錄前，會在招聘紀錄中刪除他們的個人資料。

I understand that the Social Welfare Department may require our residential care home to submit detailed information about the job application of individual job seekers (including application records and interview records), and approach the job-seekers to check the recruitment records. Our residential care home has sought the consents of the job-seekers for disclosing their personal data to the Social Welfare Department. For job-seekers who have refused to give consents, our residential care home will redact their personal data from the recruitment records before submitting the recruitment records to the Social Welfare Department.”

本人聲明本人在此文件及「招聘本地護理員紀錄表」內提供的資料全屬真實和正確。本人明白如本人蓄意或存心提出不正確資料或隱瞞任何事項，或錯誤引導社會福利署，社會福利署會終止處理本申請及在指定時間內不會接受本院舍的配額申請，本人亦須負上有關的法律責任。

I declare that the information furnished here and in the “Record Form on Recruitment of Local Care Workers” is true and accurate. I understand that if I knowingly or wilfully make any false statement or withhold any information, or otherwise mislead the Social Welfare Department, the Social Welfare Department will terminate the processing of this application and will not accept any quota application of our residential care home within a specified period of time, and also I shall bear the legal responsibilities.

獨資經營者／董事／獲授權合夥人／

獲授權代表姓名* #（請以正楷填寫）

Name of sole proprietor / director / authorised partner /

authorised representative* # (in block letters): _____

簽署 Signature : _____

申請者蓋印 Applicant's chop

日期 Date : _____

姓名、簽署及申請者蓋印必須與「特別計劃」申請表第 6 部分的申請者姓名、簽署及申請者蓋印相同。

The name, signature and applicant's chop must be the same as in Part 6 of the application form of the Special Scheme.

* 請刪去不適用者。Please delete where inappropriate.

備註：申請者須保留上述招聘廣告的正本／打印本、連續 14 個曆日在勞工處「互動就業服務」網站／本地報章／招聘網站刊登該招聘廣告的證明文件，及每一位求職者的應徵紀錄和面試紀錄(如適用)(包括求職者的姓名及聯絡資料、是否成功聘用、不獲聘用的原因、拒絕受聘的原因等資料)至本申請期完結後 6 個月，以供社會福利署抽查。

Remark: The applicant should keep original copy/printout of the above recruitment advertisement(s), documents of proof that such recruitment advertisement(s) has/have been published on the Interactive Employment Service website of the Labour Department /in local newspaper(s)/on recruitment website(s) for a continuous period of 14 calendar days and the application record and interview record (if applicable) of each job-seeker (including the name and contact information of the job-seeker, whether he/she was successfully employed, the reason(s) for not being employed, and the reason(s) for declining the offer, etc.) for six months after the end of this application period for spot check by the Social Welfare Department.

「院舍輸入護理員特別計劃」
Special Scheme to Import Care Workers for Residential Care Homes

招聘本地護理員紀錄表
Record Form on Recruitment of Local Care Workers

(招聘期 Recruitment Period: _____ 至 to _____)

院舍名稱 Name of Residential Care Home: _____

牌照處檔號／私營醫療機構編號*LORCHE/LORCHD/PHF* No.: _____

(* 請刪去不適用者。 *Please delete where inappropriate.)

院舍蓋印 Residential Care Home Stamp: _____

A. 應徵護理員職位的求職者人數 No. of job-seeker(s) applied for the post of care worker: _____
(如沒有, 請填"0"; 否則請繼續填寫 B 和 C 部分)
(If nil, please fill in "0"; otherwise please continue with filling of Part B and C)

B. 獲邀請參加面試人數 No. of job-seeker(s) invited to attend interview: _____

面試期 Interview Period : _____ 至 to _____

註: (1) 請在括弧內填寫人數。如沒有, 請填 "0"。 Please fill the number of person(s) in the bracket. If nil, please fill in "0". (2) 每位應徵者成功獲聘而離職/拒絕受聘/不獲聘用的原因可有多於一項。 Each job-seeker may have more than one reason for having Employment terminated after Employed/Declined offer/Not employed.		
填表時已成功獲聘人數 No. of job-seeker(s) have been employed when filling out the form ()	拒絕受聘人數 No. of job-seeker(s) declined offer ()	不獲聘用人數 No. of job-seeker (s) not employed ()
填表時仍在職人數 No. of person(s) still in employment when filling out the form () 填表時已離職人數 No. of person(s) terminated employment when filling out the form () 因下述原因離職人數 No. of person(s) left due to following reason(s): ● 薪酬 Remuneration () ● 工作性質 Work nature () ● 工作環境 Work environment () ● 工作時間 Working hours () ● 其他 Others (please specify): () _____	因下述原因拒絕受聘人數 No. of person(s) declined offer due to following reason(s): ● 薪酬 Remuneration () ● 工作性質 Work nature () ● 工作環境 Work environment () ● 工作時間 Working hours () ● 其他 Others (please specify): () _____ _____	因下述原因不獲聘用人數 No. of person(s) not employed due to following reason(s): ● 教育程度不符 Academic level not attained () ● 缺乏必須經驗 Lack of essential experience () ● 缺乏必須技術 Lack of essential skill(s) () ● 語文程度不符 Language requirement(s) not met () ● 其他 Others (Please specify): () _____ _____
拒絕或缺席面試人數 Refused or failed to attend interview ()		

C. 不獲邀請參加面試人數 No. of job-seeker(s) not invited to attend interview: _____

註: (1) 請在括弧內填寫人數。如沒有, 請填 "0"。 Please fill the number of person(s) in the bracket. If nil, please fill in "0". (2) 每位應徵者不獲邀請參加面試的原因可有多於一項。 Each job-seeker may have more than one reason for not being invited to attend interview.
因下述原因不獲邀請參加面試求職者人數 No. of job-seekers not invited to interview due to following reason(s): ● 教育程度不符 Academic level not attained () ● 缺乏必須經驗 Lack of essential experience () ● 缺乏必須技術 Lack of essential skill(s) () ● 語文程度不符 Language requirement(s) not met () ● 其他 Others (please specify): () _____

院舍輸入護理員特別計劃
Special Scheme to Import Care Workers for Residential Care Homes
院舍全職本地僱員資料報表
Information of Full-time Local Employees of Residential Care Home

牌照處檔號/私營醫療機構編號*
LORCHE/LORCHD/PHF* No. : _____
院舍名稱
Name of Residential Care Home : _____
院舍地址
Address of Residential Care Home : _____
院舍電話
Telephone No. : _____
全職本地僱員總人數 (包括院舍所有工種)
Total Number of Full-time Local Employees (including all types of staff of the home) : _____
全職本地護理員每月工資幅度 (不包括超時工資)
Salary Range of Full-time Local Care Worker(s) per month (excluding any overtime pay) 由 From HK\$ _____ 至 to HK\$ _____
全職本地護理員每月工資平均數 (不包括超時工資)
Average Salary of Full-time Local Care Worker(s) per month (excluding any overtime pay) HK\$ _____

序號 S/N	職位 Post	全職本地僱員人數 Number of Full-time Local Employees	序號 S/N	職位 Post	全職本地僱員人數 Number of Full-time Local Employees
1	護理員		7		
2			8		
3			9		
4			10		
5			11		
6			12		

注意事項 Remarks :

- 如本頁行數不足填寫,請自行影印及必須在每頁填上獨資經營者/董事/獲授權合夥人/獲授權代表姓名和簽署,以及蓋上申請者蓋印。
Please make copies of this page for insufficient space, with the name of sole proprietor / director / authorised partner / authorised representative together with the applicant's chop on each page.
- 「院舍輸入護理員特別計劃」的本地僱員與輸入護理員的比例是以全職本地僱員計算,而全職是指該僱員每周總工作時數不少於35小時。
Under the Special Scheme to Import Care Workers for Residential Care Homes, the ratio of local employees to imported care workers is calculated on basis of full-time local employees, and a full-time employee refers to one who works not less than 35 hours per week.
- 每周工作不少於 35 小時的兼職/替假本地護理員,若同時每月平均工作日數或時數不少於一般輸入護理員每月工作時間的80% (即每月平均工作日數÷26 日 ≥ 0.8 或每月平均工作時數÷26÷9 小時 ≥ 0.8),才會被視為全職護理員。
A part-time/substitute local care worker will be regarded as a full-time care worker on the condition that he/she works no less than 35 hours per week and his/her average number of working days or the number of working hours per month is not less than 80% of working time of an imported care worker (i.e. average working days per month÷26 days ≥ 0.8 or average working hours per month÷26÷9 hours ≥ 0.8).
- 全職本地護理員每月工資平均數是以申請日前一個月所有全職本地護理員薪金總和 (不包括超時工資) 除以全職本地護理員人數計算。
The average salary of full-time local care worker(s) per month is calculated by dividing the sum of the salaries (excluding any overtime pay) of all full-time local care workers by the number of full-time local care workers in the month preceding this application date.

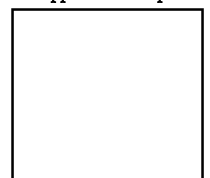
本人聲明在此文件內提供的資料均屬真實及正確。本人明白如本人蓄意或存心提出不正確資料或隱瞞任何事項,或錯誤引導社會福利署,社會福利署會終止處理本申請及在指定時間內不會接受本院舍的配額申請,本人亦須負上有關的法律責任。

I declare that all information furnished here is true and accurate. I understand that if I knowingly or wilfully make any false statement or withhold any information, or otherwise mislead the Social Welfare Department, the Social Welfare Department will terminate the processing of this application and will not accept any quota application of our residential care home within a specified period of time, and also I shall bear the legal responsibilities.

獨資經營者/董事/獲授權合夥人/
獲授權代表姓名*# (請以正楷填寫)
Name of sole proprietor / director / authorised partner /
authorised representative*# (in block letters) : _____

申請者蓋印
Applicant's chop

簽署 Signature : _____ 日期 Date : _____



院舍輸入護理員特別計劃
Special Scheme to Import Care Workers for Residential Care Homes
現職輸入護理員名單
List of In-employ Imported Care Worker

(如本頁行數不足填寫，請自行影印及必須在每頁填上獨資經營者／董事／獲授權合夥人／獲授權代表姓名和簽署，以及蓋上申請者蓋印。)

(Please make copies of this page for insufficient space, with the name of sole proprietor / director / authorised partner / authorised representative together with the applicant's chop on each page.)

牌照處檔號／私營醫療機構編號*

LORCHE/LORCHD/PHF* No.

院舍名稱

Name of Residential Care Home

院舍地址

Address of Residential Care Home

院舍電話

Telephone No.

現職輸入護理員總人數

Total Number of In-employ Imported Care Worker(s)

注意：請按輸入護理員「合約到期日」先後次序填寫資料。 Remark: Please fill in the information according to chronological order of the "End Date of Contract".

序號 S/N	「補充勞工計劃」檔案編號／ 「院舍輸入護理員特別計劃」配額編號 Supplementary Labour Scheme Reference No. / Special Scheme to Import Care Workers for Residential Care Homes Quota No.	僱傭合約編號 Employment Contract No.	中文姓名 (如適用) Chinese Name (if applicable)	英文姓名 (必須填寫) English Name (mandatory)	入境簽證／ 進入許可號碼 Visa / Entry Permit No.	合約開始日 Start Date of Contract			合約到期日 End Date of Contract			每月工資 [^] Salary per month [^] HK\$	是次申請配額為 續約之用? Quota applied in this application for contract renewal?
						年 yy	月 mm	日 dd	年 yy	月 mm	日 dd		
1												\$	*是Yes / 否No
2												\$	*是Yes / 否No
3												\$	*是Yes / 否No
4												\$	*是Yes / 否No
5												\$	*是Yes / 否No

[^]每月工資不包括超時工資。 [^]Salary excluding any overtime pay per month.

本人聲明在此文件內提供的資料均屬真實及正確。本人明白如本人蓄意或存心提出不正確資料或隱瞞任何事項，或錯誤引導社會福利署，社會福利署會終止處理本申請及在指定時間內不會接受本院舍的配額申請，本人亦須負上有關的法律責任。

I declare that all information furnished here is true and accurate. I understand that if I knowingly or wilfully make any false statement or withhold any information, or otherwise mislead the Social Welfare Department, the Social Welfare Department will terminate the processing of this application and will not accept any quota application of our residential care home within a specified period of time, and also I shall bear the legal responsibilities.

獨資經營者／董事／獲授權合夥人／

獲授權代表姓名*# (請以正楷填寫)

Name of sole proprietor / director / authorised partner /

authorised representative*# (in block letters): _____

簽署Signature: _____ 日期Date: _____

*請刪去不適用者。 *Please delete where inappropriate.

#姓名、簽署及申請者蓋印必須與「院舍輸入護理員特別計劃」申請表第6部分的申請者姓名、簽署及申請者蓋印相同。

#The name, signature and applicant's chop must be the same as in Part 6 of the application form of the Special Scheme.

(09/2023)

申請者蓋印
Applicant's chop



院舍輸入護理員特別計劃
Special Scheme to Import Care Workers for Residential Care Homes

已獲「補充勞工計劃」原則性批准輸入 / 「院舍輸入護理員特別計劃」配額但有關輸入護理員
(包括替補輸入護理員) 仍未到港報表

List of imported care workers (including replacement of imported care workers) not yet arrived in Hong Kong while approval-in-principle for importation under the Supplementary Labour Scheme / quota(s) under the Special Scheme to Import Care Workers for Residential Care Homes have been granted

(如本頁行數不足填寫，請自行影印及必須在每頁填上獨資經營者／董事／獲授權合夥人／獲授權代表姓名和簽署，以及蓋上申請者蓋印。)
(Please make copies of this page for insufficient space, with the name of sole proprietor / director / authorised partner / authorised representative together with the applicant's chop on each page.)

牌照處檔號／私營醫療機構編號*

LORCHE/LORCHD/PHF* No. : _____

院舍名稱

Name of Residential Care Home : _____

院舍地址

Address of Residential Care Home : _____

院舍電話

Telephone no. : _____

現仍未到港輸入護理員總人數

Total Number of Imported Care Worker(s) has/ have not yet arrived in Hong Kong : _____

[請注意：每一序號代表一個已獲「補充勞工計劃」原則性批准輸入／「院舍輸入護理員特別計劃」配額但現仍未到港的輸入護理員（包括替補輸入護理員）。]

[Please note: Each serial number(S/N) represents one imported care worker (including replacement of imported care workers) who was covered by approval-in-principle for importation under Supplementary Labour Scheme / quota granted under the Special Scheme to Import Care Workers for Residential Care Homes but have not arrived in Hong Kong yet.]

序號 S/N	所屬計劃編號（請在適當方格內填寫） Reference No. of Scheme related (Please fill in the appropriate box)		原則上批准／配額批出日期 （請按日期先後順序列出） Date of Approval-in-principle / Quota Granted (Please list in chronological order)	僱用期剩餘月數 Remaining Month(s) of Employment Period
	「補充勞工計劃」 檔案編號 Supplementary Labour Scheme Reference No.	「院舍輸入護理員特別計劃」 配額編號 Special Scheme to Import Care Workers for Residential Care Home Quota No.		
1				
2				
3				
4				
5				

本人聲明在此文件內提供的資料均屬真實及正確。本人明白如本人蓄意或存心提出不正確資料或隱瞞任何事項，或錯誤引導社會福利署，社會福利署會終止處理本申請及在指定時間內不會接受本院舍的配額申請，本人亦須負上有關的法律責任。

I declare that all information furnished here is true and accurate. I understand that if I knowingly or wilfully make any false statement or withhold any information, or otherwise mislead the Social Welfare Department, the Social Welfare Department will terminate the processing of this application and will not accept any quota application of our residential care home within a specified period of time, and also I shall bear the legal responsibilities.

獨資經營者／董事／獲授權合夥人／

獲授權代表姓名*#（請以正楷填寫）

Name of sole proprietor / director / authorised partner /
authorised representative*# (in block letters) : _____

申請者蓋印
Applicant's chop



簽署Signature : _____

日期Date : _____

*請刪去不適用者。*Please delete where inappropriate

#姓名、簽署及申請者蓋印必須與「院舍輸入護理員特別計劃」申請表第6部分的申請者姓名、簽署及申請者蓋印相同。

#The name, signature and applicant's chop must be the same as in Part 6 of the application form of the Special Scheme.