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| PLEASE READ CAREFULLY  AND COMPLETE IN DETAIL  請於填寫前小心閱讀表格內容 |  |  |

**HONG KONG INSTITUTION OF CERTIFIED AUDITORS**

**香港專業審核師學會**

The Secretary, Room 108, 1/F Sun Ling Plaza, 30 On Kui Street, Fanling, N.T., HKSAR (香港新界粉嶺安居街30號新寧中心1樓108室秘書署)

Tel (電話): 2789 2389, HomePage (網頁): <http://www.hkica.org>, Email (電郵): [info@hkica.org](mailto:info@hkica.org)

**QUALITY TESTING ENGINEER (QTE) APPLICATION FORM   
(質控檢測工程師申請表)**

Applicant to complete Sections A, B, C & D. Supporter to sign in Section E & to initial those parts of Section C which are appropriate.

申請人必須填妥甲，乙，丙和丁部分。支持者必須簽署戊部分，並在丙部分中適當部分簡簽。

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| **Section A**  **A部分** | | | Complete Personal details in block letters or type (請以英文大階或列印方式填寫個人資料)  Please indicate your name as shown on the Identity Card or other identification documents (請按証件資料填寫姓名)  \*: First alphabetical letter and first 3 number digits e.g. G112xxxxx (請提供首4位字元或數字) | | | | | | | | | | | | | | | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | **I wish to apply for the following class of QTE (本人欲申請以下 QTE專業註冊)** | | | | | **Please tick (請剔選)  Senior QTE**  **(高級質控檢測工程師)** | **QTE**  **(質控檢測工程師)** | **Associate QTE**  **(初級質控檢測工程師)** | | | | | | | | | | | | | | | | | | | | |
| Name (姓名): | | |  | | | | | Nationality (國籍): | | | | |  | | | Sex: F(女) / M(男) | | | |
| Identity Document Type  (証件類別): | | |  | | | | | | | | Identity No. (証件編號):\* | | | | | |  | | |
| Postal Address (郵遞地址): | | |  | | | | | | | | | | | | | | | | |
| Tel. No. (電話號碼)： | | |  | | | Mobile No. (手提號碼): | | | | | |  | | E-mail (電郵): | | | | |  |
| Company name (公司名稱): | | |  | |  | | | | | Position (職位): | | | |  | | | | | |
| Company Tel. No. (公司電話): | | |  | | | | | | Company E-mail (公司電郵): | | | | |  | | | | | |
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| **Section B**  **B部分** | **Obligation (义务)** |

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| I have read and agree to abide to **HKICA 101C** Regulations for Registration Scheme for **QTE**. The facts stated in this application are true and correct. I agree that HKICA can verify the authenticity of the facts for the purpose of registration  我已阅读并同意遵守HKICA 101C QTE注册计划，本申请的陈述是真实正确的，我同意HKICA可以验证事实的真实性。 | | | | | |
|  | I commit (我承诺)： | | | | |
| 1 | to abide with the Regulations and pay the fee and charge as set by HKICA as it now is, or as it may hereafter be amended (遵守法规并支付HKICA现在或以后可能要修改的费用); | | | |
| 2 | make claims regarding registration only in respect of the scope for which registration has been granted (仅在已授予注册的范围内提出陈述); | | | |
| 3 | not to claim the registration status in such a manner as to bring the registration scheme into disrepute, and refrain from making any misleading or unauthorised statement regarding the registration (不得以破坏注册方案的方式要求获得注册地位，并避免对注册做出任何误导或未经授权的陈述); | | | |
| 4 | discontinue all claims to registration upon termination or withdrawal of registration, and return any certificates issued by HKICA (在终止或撤回注册后，终止所有对注册的陈述，并退回由HKICA签发的任何证书); | | | |
| 5 | not use the certificates and the HKICA logo in a dishonest or fraudulent manner (不得以不诚实或欺诈的方式，使用证书和HKICA徽标); | | | |
| 6 | HKICA has the ownership of the issued certificates (HKICA拥有已颁发证书的所有权限); | | | |
| 7 | I have / have not\* been convicted of a criminal offence (我已经/尚未\*被裁定为刑事犯罪); | | | |
| 8 | I accept that my personal information is released to personnel within HKICA, Accreditation Officer and Auditor during assessment, and (我接受在评估期间将我的个人信息发布给HKICA的人员，认证官员和审核员，及 | | | |
| 9 | I accept / do not accept, that if certified, that my name, certificate number and expiration date is published on internet (我接受/不接受经注册的資料，包括我的姓名，证书编号和有效期的信息在互联网上发布) | | | |
|  | Signature of applicant:  簽署 |  | Date:  日期 |  |

**\* PLEASE DELETE AS APPROPRIATE (请适当删除)**

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| **Section C**  **C部分** | **Academic / Working / Training Qualifications (学术/工作/培训資歷)** |

Your entries should be contained within the space provided. Please provide details on separate sheet(s) and attach to this form if there is insufficient space. (內容应包含在以下空间内，如果空间不足，请在申請表以外加上附頁以提供详细信息。)

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| From (由)  Mth(月)/Yr(年) | | To (至)  Mth(月)/Yr(年) | | Academic Qualifications (学术資歷) | | | | | | Verifying Initials of Supporters |
| **Sub-Section 1第一節** | | | | Tertiary Institute/Examination Board/country  大专院校/考试委员会/国家 | | | Award and date  获頒日期 | | Discipline / Subject studied  学科/曾修讀課程 | (支持者的验证簡簽) | |
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| **Sub-Section 2第二節** | | | | Professional Qualification/ Competence Experience (专业資歷/能力经验) | | | | | |  |
| Institute/ Professional body (研究所/专业团体) | | | | Award and date(获頒日期) | |  |
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| **Sub-Section 3第三節** | | | | Working Experience, please attach CV with further details (工作经验，请附简历以提供详细資料) | | | | | |  |
| Organisation (機構) | Position held (職位) | Management system experience (管理系统经验) | | | |  |
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| **Sub-Section 4第四節** | | | | Training Record (已被核准的培训資歷) | | | | | |  |
| Training organization (培训機構) | | Programme title (培训课程/題目) | | | |  |
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| **Section D**  **D部分** | Supporter shall be a HKICA member or applicant’s company  (支持者需為HKICA会員或申請人公司) |

I support the Applicant from personal knowledge, as a person worthy of consideration for registration to the level of QTE and I endorse the correctness of those parts of Section C including working experience, academic and training qualification which have identified by my Chop / initial. (我作为QTE申请人的支持者，以我个人知识为申请人提供証明，以印章或簡簽认可C部分中的申请人的工作经验，学术和培训资格等部分。)

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| Company： |  |  | Supporter： |  |
|  |  |  |  | |
| Company chop： |  |  | Signature： |  |
| Date： |  |  | Date： |  |

**THIS FORM NEEDS TO BE COMPLETED & RETURNED TOGETHER WITH THE FEES (DETAILS PLEASE REFER TO HKICA 202E SCHEDULE OF FEES FOR REGISTRATION), FULL SET OF SUPPORTING DOCUMENTS AS STIPULATED IN HKICA 202C HKQTE REGISTRATION SCHEME.**

申請人必須填妥此表格，並需連同所需費用（請參閱HKICA 103註冊費用）及証明文件副本（請參閱HKICA 201C HKQTE註冊方案）交回本會。

**Application Guidelines (申请指引)**

1. Applicant has read and understood the registration criteria and regulations as set by HKICA;

申请人已经阅读并理解了HKICA制定的註冊标准和规定;

1. Complete the “Application Form” with all fields properly filled;

填妥“申请表”所有欄位;

1. Applicant has confirmed the information is accurate.

申请人确认信息正确

1. Payment of registration fee, methods as follows (支付注册费，方法如下):
2. Bank transfer to HKICA Hang Seng Bank account N0. (银行转账至HKICA恒生银行账户) No.: 390-202588-001
3. Mail a cheque payable to “Hong Kong Institution of Certified Auditors Limited” to the Secretary of HKICA with applicant’s name on back of the cheque. Please be reminded that any post-dated cheque is not accepted (以支票抬头，将应付给“香港专业审核师学会”的支票邮寄给HKICA的秘书。请注意，本會不接受期票);
4. Submission of application form and related documents (提交申请表及相关文件)

Send the application form, supporting documents and cheque to the Secretary by mail (通过邮件发送申请表，证明文件并核对秘书)

Address (地址): Room 108, 1/F Sun Ling Plaza, 30 On Kui Street, Fanling, N.T. OR by Email to (新界粉岭安居街30号新灵广场1楼108室或通过电子邮件) ： [info@hkica.org](mailto:info@hkica.org)

1. HKICA Secretariat will inform the applicant by e-mail confirming the receipt of application within 5 working date. Missing records and documents will be requested to be provided (HKICA秘书处将在5个工作日内，通过电子邮件通知申请人确认收到申请，如有欠缺记录或文件，亦會一併要求申请人提供)