



Institute of Professional Education And Knowledge
高 峰 進 修 學 院

Enrollment Form

本院專用 Office use only Handled by & Remarks:
 Received Date:

By Mail Cheque
 Walk-in Cash

ver 20070426

NOTES FOR APPLICANTS

- Please use one form for each course and photocopy the form if necessary.
- If you pay the course fees by cheque, please return the form to us by mail / in person with a crossed cheque (one cheque for one course) payable to 'Vocational Training Council'. If you pay the course fees by credit card, please return the form to us by fax / by mail / in person. (Payment by credit card accepted only for course fee(s) of HK\$5000 or above)
 Fax : 2891 5707
 Address : PEAK, 9/F, VTC Tower, 27 Wood Road, Wanchai, HK
- All places are allocated on a first-come-first-served basis. Incomplete form and form received without payment will be regarded as unsuccessful application.
- Course regulations are stated in the Institute's Quarterly Bulletin. Applicants / trainees should follow the relevant policies.
- CPD / CPT credits will be deducted for late trainees on a pro-rata basis. MPFA & SFC credits will be given only when students attend more than 80% of the course. Minimum unit of above mentioned credits is 0.5 credit. Lateness or early leave which is less than 0.5 hour will still be counted as 0.5 hour (according to the clock of PEAK).

DECLARATION

- I declare that all information provided in this enrollment form is, to the best of my knowledge, accurate and complete.
- I acknowledge and agree that my personal data will be used by PEAK for the enrollment and all course and administrative purpose.
- I acknowledge and agree that my personal data will be used by PEAK for the promotion of courses or seminars, etc. I, at any time, can inform PEAK in writing or by email (peak@vtc.edu.hk) to stop sending any promotional material to me.
- I acknowledge and agree PEAK to check my ID card for verifying my identity while I am participating in CPD/CPT courses.
- I understand that I should provide as much information to PEAK as I can or my application can not be processed efficiently.
- I acknowledge and agree PEAK to define my lateness and early leave of a course according to the clock of PEAK. I also agree to Point 5 of the Notes for Applicants which defines the circumstance for deduction of CPD, SFC and MPFA credits.

PARTICULARS OF APPLICANT (Please fill in name as appeared on your HKID card)

English : (surname) _____ (given name) _____ Chinese : _____

HKID No. : _____ Date of Birth : (dd/mm/yyyy) _____ Gender : Male Female

Mailing Address : _____

Company of Employment : _____ Position / Department : _____

E-Mail Address : (1) _____ (2) _____

Telephone (day-time) : _____ Mobile : _____ Fax : _____

COURSE APPLIED FOR

Program Code / Name: _____ Intake (dd/mm/yyyy): ____ / ____ / ____

(For Diploma / Certificate Applicants only)

Module Code	Module Name	Commencement Date

Education History

Course	Institution / Exam.	Year of Graduation	Percentage of Completion (%)

Please "✓" this box if you want your application to be considered as mature student application. (Please refer to course leaflet for details)

Employment History

If employed, please list out your employment history and positions you have held, which you consider relevant to the course for which you are applying. You may include certified copies of relevant references from employers. (Please use separate sheet if necessary)

Company Name	Duration: From / To	Position	Full time / Part time

* Please submit relevant qualification documents together with your application

PAYMENT METHOD

Cash or Cheque (Cheque should be made payable to "Vocational Training Council")
 Amount: HK\$ _____ Cheque No.: _____

Credit Card (only for **HK\$5000 or above** per payment)

Card Number: _____

Expiry Date : _____ Amount: _____

Cardholder's Name: _____

Authorized Signature: _____

CONTINUING

EDUCATION FUND (CEF)

Apply for CEF*
 (Please submit with CEF application form and HKID card copy at least 10 working days before course commencement. No late submission will be accepted)

Applied CEF / Not applying CEF*

Where did you learn about this course?

Website Email
 Leaflet Quarterly Bulletin
 Newspaper/Magazine
 (Name: _____)
 Other: _____

CONTACT METHOD

Please specify how you would like to be notified: (If not specified, we will notify you by Mail)
 By Mail By Fax
 By E-Mail

I have read, understood and am willing to follow PEAK's Notes for Applicants above and all the regulations stated by PEAK. I declare the truth and accuracy of the information I put down in this application form.

Applicant Signature		Date	
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