保良局鄧肇堅慈善基金

申請程序

- 1. 申請表格可向保良局董事會秘書處索取,秘書處地址為香港銅鑼灣禮頓道 66 號莊啓程大廈 10 字樓;表格亦可於保良局網頁 www.poleungkuk.org.hk 下載。
- 2. 填妥表格後連同有關文件交回保良局董事會秘書處辦理。
- 3. 審查員(胡關李羅律師行)將對申請人提供的資料作出審查,然後將建議交由基金管理委員會批核。
- 4. 批核結果將由基金義務執行秘書通知申請人。

申請者須知

- 1. 若要獲得本基金撥款,申請人必須來自貧苦家庭及
 - (i) 因為突發之不幸事件(包括死亡、需要立刻動手術、火災、意外受傷,及其他各種災禍)而急需金錢;或
 - (ii) 因身體/健康狀況問題而迫切需要購買醫藥、醫療輔助器材/用品或居所設施 (如裝置扶手、平安鐘系統)。 基金管理委員會亦可按個別情況作特殊考慮。
- 2. 每一獲批准資助的申請人所得的撥款最高為港幣一萬元。每一申請人一生只可獲本基金撥款一次。
- 3. 若遇有嚴重天災,因而產生大量災民,而政府及其他基金又已負責賑災工作,則以遭遇該天災為理由向本基金要求援助的申請將不獲考慮。
- 4. 遞交申請表時,申請人或其親屬應出示下列有關文件:
 - (i) 申請人或其親屬的香港身份證副本;
 - (ii) 政府部門、區議會、醫院、街坊會或慈善團體及福利機構的推薦書;
 - (iii) 死亡證,由警署或警察交通部發出的文件證明意外的發生;
 - (iv) 其他有助基金管理委員會審查個案的證明文件,例如醫生或有關醫護人員的建議報告、入息證明、住址證明、銀行存摺/月結單、主要/大額開支的收據(如租單等)、申請資助購買的物品的報價單/發票/收據等;
 - (v) 若轉介社工所屬之機構同時為申請人申請資助購買的物品的提供者,申請人除出示轉介社工所屬機構的報價 單外,亦須提交至少一份由另一供應商提供的報價單。

上述有關文件必須由有關組織或機構的負責人正式簽署,簽署人應同時填報其電話號碼以便進一步聯絡。未能提供有關文件的申請將不獲考慮。

- 5. 基金管理委員會保留拒絕任何申請及不作解釋的權利。
- 6. 任何人士因獲得本基金撥款而喪失申請其他基金援助或保險賠償的資格,本基金及基金管理委員會槪不負責。
- 7. 若因批核申請或就申請作出建議或決定而引致有疏忽、錯誤、拖欠、違約或遺漏等情況,基金管理委員會、義務 執行秘書及審查員皆毋須負任何責任。
- 8. 本基金需收集申請人的個人資料,以作審查批核之用。在有需要的情況下,本基金可能會向其他機構、團體及人士收集申請人的個人資料,以執行基金審批程序,或因履行法例、政府及監管方面的規定而作出有關之透露,包括在保密的情況下持有、使用、轉移或向下列人士披露申請人的個人資料:(i)任何代理機構或與本基金運作有關的行政或服務機構;(ii) 其他慈善基金及有關審批委員會及其成員。根據個人資料(私隱)條例,申請人如欲查閱或更改有關此表格上的個人資料,請與保良局鄧肇堅慈善基金義務執行秘書聯絡,電話:2277-8332。查閱或更改普通資料一般不會收取任何費用,但本基金有權就申請人的特殊要求酌情收取處理該等查詢的手續費。
- 9. 若申請條款的中、英文本之間有任何歧義時,則應以中文本為準。

Po Leung Kuk Tang Shiu Kin Charitable Fund

Application Procedures:

- 1. Application forms can be obtained from Po Leung Kuk Board Secretariat at 10/F, Vicwood K.T. Chong Building, 66 Leighton Road, Causeway Bay, or can be downloaded from www.poleungkuk.org.hk.
- 2. Completed application forms should be forwarded to Po Leung Kuk Board Secretariat.
- 3. Applications will be vetted by the Adjudicator (Woo, Kwan, Lee and LoS olicitors & Notaries) who will make recommendations for consideration of the Fund Management Committee (hereafter referred to as the "Committee").
- 4. Applicants will be informed of the result of their applications by the Honorary Executive Secretary of the Fund.

Terms & Conditions:

- 1. Those who are from poor families and: -
 - (i) suffer from adversities such as death, accidents, disasters or emergency operation, or
 - (ii) have a pressing need for medicine, rehabilitative aids or home facilities (e.g. handrails, Personal Emergency Link Service, etc.) owing to the health condition of themselves or of their family members
 - will be eligible to apply for monetary assistance from the Fund.
- 2. The maximum amount of grant by the Fund for each application is HK\$10,000. An applicant will only be eligible to receive a grant from the Fund once in a life time.
- 3. Victims of serious natural disasters, who have already been given financial aid by the Government or other funds for the same event, are not qualified to apply.
- 4. All applications must be accompanied by the following supporting documents:
 - (i) Copies of Hong Kong Identity Card of the applicant or his/her family members;
 - (ii) Recommendations b y go vernment de partments / district b oards / kai f ong a ssociations / hospitals / charitable organisations;
 - (iii) Death certificate, police reports;
 - (iv) Any other do cuments that will facilitate the Committee in considering the application, such as reports from medical doctors or medical professionals, i ncome s tatements, address proof, bank passbooks/statements, receipts of major expenditure (e.g., rental), quotations/invoices/receipts of the goods applied for grant, as appropriate;
 - (v) If the referring body of the application is at the same time the provider of the goods under application for grant, at least one more quotation from another supplier would need to be provided.

The above documents must bear the authorised signatures of the respective organisations/bodies, and the telephone numbers of the signatories should also be provided. Applications not providing sufficient information will not be processed further.

- 5. The Committee reserves the right to reject any application.
- 6. In the event that an applicant should become unqualified to apply for other funds or to claim insurance compensation as a result of being granted financial assistance by this Fund, the Committee shall not be held responsible whatsoever.
- 7. The Committee, the Honorary Executive Secretary and the Adjudicator of the Fund shall not be held responsible for any negligence, mistakes, defaults or omissions made as a result of their vetting, recommendations or decisions.
- 8. Personal data of the applicant are collected for the purpose of processing applications. If deemed necessary, the Committee may collect the applicant's personal data from other organisations, associations or relevant persons. In the course of vetting, or in compliance with government legislation, under strict confidentiality, the Committee will hold, use, transfer or disclose the applicant's personal data to: (i) those organisations relating to the functioning of the Fund; (ii) other charitable funds and their respective fund management committees. Applicants who wish to make access to or to change the personal information provided in this form, please contact the Honorary Executive Secretary of the Fund at 2277-8332. Normally, no fee will be imposed for request for data access/correction; however, the Fund reserves the right to impose a fee for special requests as appropriate.
- 9. The English text is a translation only. In case of any difference in meaning between the two languages, the Chinese text shall prevail.

保良局鄧肇堅慈善基金申請表

Po Leung Kuk Tang Shiu Kin Charitable Fund Application Form

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□每季差前 Quarterly rates \$	申請人 : (<i>請在適</i> 當 1. 1.: 1.: 2. 其 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	経済状況 Applicant's Finant 方格内填「く)號,並提供所需資料 Please tick 定庭每月平均收入 Average monthly for 要入息來源 Major sources of incom 1 □申請人 Applicant 2 □薪金 Salary □營業純利 Business net profit な他非經常性收入 Other sources of ne コ保險金 Insurance compensation E所費用 Housing expenses コ租住公屋 Public housing コ毎月租金 Monthly rent コ租住私人樓字 Private housing コ毎月租金 Monthly rent	k appropriate box and provide need amily income e □配偶 Spouse \$	□其他 () □ 和金收□ 其他 () □ 其他 () □ 其他 () □ 其他 () □ 与持格 () □ 与 ()	Amound Others Others Others Aortgage 共款 Monthl	注額 nt applied Income	\$ \$	

	Lil. →					
	姓名 Name	年龄 Age	香港身份證號碼 HKID Card No.	關係 Relationship	職業 Occupation	是否與申請人同住 Whether residing with the applicant
						□是 Yes □否 No
						□是 Yes □否 No
						□是 Yes □否 No
						□是 Yes □否 No
		家庭平均	每月總支出 Average	monthly househo	ld expenses	\$
本人	也基金之申請情況 Application 就上頁第 II 部份的申請理由, urding the reason for application as descr					
	曾申請				导撥款共 <u>\$</u>	
	I have applied for		(name(s)	of the fund(s)), and h	ave been grante	ed a total of \$
	現正申請			(基金名稱),申請紹	結果待覆。	
	I am applying for		(name(s) c	of the fund(s)), await	ing the result o	f the application.
	沒有申請其他任何基金。I have not a	applied and a	m not applying for any	other funds.		
聲明	Declaration					
	申請人簽署 Signature of appl	licant	(姓名	Z Name		日期 Date
NI T		l II Ol-	_	檔案	編號 File No).
	古審核機構填寫 For Official	l Use Only	7	檔案	編號 File No	
<u>以下</u> 1.	由審核機構填寫 For Official 補充資料 Supporting data	l Use Only	7	檔案	編號 File No	
		l Use Only	7	檔案	編號 File No	
		l Use Only	7	檔案	編號 File No	
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2.	補充資料 Supporting data 審查員胡關李羅律師行報告 Recommendation	mendations f	簽署 Sfrom Woo, Kwan, Lee	ignature & Lo, Solicitors &		日期 Date
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