Serial No. : _____

Application for the Payment of Contract Gratuity for Teachers under the Enhanced Native-speaking English Teacher (NET) Scheme in Secondary Schools

Name of School : _____

School Code : ☐☐☐☐ Tel. No : _____ Fax No : _____

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To : Secretary for Education (*Attn. : Funds Section, Finance Division*)

Note : The data collected below is used for payment of Contract Gratuity to the Native-speaking English Teacher (NET). The provision of information is obligatory. The information collected may be disclosed to other government departments/agencies authorized to process personal data for audit and statistical purposes. Request for personal data access and correction should be addressed to the Accounting Officer, whose address is *Room 1517, 15th Floor, Wu Chung House, 213 Queen's Road East, Wan Chai, Hong Kong*.

Section I *(to be completed by School Supervisor)*

(a) I certify that the following Native-speaking English Teacher (NET) is entitled to a Contract Gratuity.

1. Name : _____
2. HK Identity Card No. : ☐☐☐☐☐☐☐ (☐)
3. Staff Ref. No. : ☐☐☐☐☐☐☐☐
4. Date of Commencement of Contract : ☐☐ ☐☐ ☐☐☐☐ *Day Month Year*
5. Date of Completion of Contract : ☐☐ ☐☐ ☐☐☐☐ *Day Month Year*
6. Period(s) of no-pay leave during the contract : _____
7. Total basic salary received and amount of Contract Gratuity entitled :

Contract Period	**(a)**	**(b)**	**(c)**	**(d)**	**(e)**
	Total basic salary received	Percentage of basic salary	Amount of Contract Gratuity entitled (c) = (a)x(b)	Amount of employer's contribution to the MPF Scheme for the NET	Amount of Gratuity payable to the NET (e) = (c) – (d)
From To	***($)***	***(%)***	***($)***	***($)***	***($)***
/ / / /		15%			

8. Payment (see note (1) below) :

	Proposed Date	Amount of Gratuity
First payment	/ /	***$***
Second payment	/ /	***$***

(b) I certify that the above information is correct.

(c) I undertake to inform the Funds Section of the Education Bureau via the Senior School Development Officer as soon as possible if there is any change in the above information provided and to repay the Government for any overpayment of Contract Gratuity to the staff concerned.

Signature of Supervisor : _____
Name: ( )
Date:

School Chop

Note:

(1) The first payment of gratuity covering the completed period of resident service is payable to the NET not earlier than 4 clear working days before the commencement of the summer vacation at the end of the contract. The second payment relating to the period of summer vacation at the end of the contract should be made not earlier than 4 clear working days before the expiry of the contract.

(2) The completed application form should reach the Funds Section, via the SSDO, at least 4 weeks before the expected date of the first payment.

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Section II *(to be completed by SSDO)* * put a ⌈✓⌋ in the appropriate ☐

For paras. 1 to 6 of Section I, I confirm that

☐ they are correct.

☐ they are correct **except** para(s)._____ which has/have been amended and initialled by me.

Signature of SSDO( ) : _____
Name : ( )
Date :

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Section III *(to be completed by Finance Division)*

Received on	*Payment Voucher No.*	*Amount*	*Payment Date*	*Prepared by*	*Date*	*Checked by*	*Date*
		$	/ /				
		$	/ /				