Enhanced Native-speaking English Teacher (NET) Scheme in Secondary Schools Application for Advance of Salary

Not 1. 2.	es: Only the ORIGINAL copy of the form and any subsequent Please ensure that sufficient postage is paid to avoid unsu mail items will be disposed of by the Hongkong Post.					
D.A.	DT I (To be completed by the NET)	* Delete as appropriate				
	RT I (To be completed by the NET) Supervisor/Principal of	(School)				
1.	I wish to apply for an advance of salary in the amount of					
	HK\$ per month.	. My ousie surary is				
2.						
3.	I confirm that I have read and understood the EDB Circular No. 9/2009 including Completing NET-Forms A-E and the stipulations related to advance of salary in the on the Terms and Conditions of Service.					
	Signature of NET:	Date:				
	Hong Kong Identity Cord Number					
	(Mand	ntory to be provided once available)				
	Full name of NET: (Given names)	(Surname)				
	RT II (To be completed by aided schools/special school Secretary for Education [Attn: the NET Administration Team, the Education Bur Room 1110, 11/F, Wu Chung House 213 Queen's Road East Wanchai, Hong Kong					
1.	I certify that the applicant (a) employed in my school from	o; and				
2.	The grant of a salary advance of HK\$ i arrange the payment.	s approved. I should be grateful if you would				
3.	Please recover the advance by six equal monthly instalm from (month/year).	ents of HK\$ each with effect				
Sig	nature of supervisor/principal*:	Date:				
	ma of our aminor/minoinal*. Mr. Mr. Mr. Miss *					
Nai		(School code:)				
Sch	1 11	<u> </u>				
		Fax no.:				
Cor		Tel. no.:				
1 08	st of contact person: 1					

PART III (To be completed and retained by caput schools)

1.	I certify that the applicant				(Full name) is:	
	(a) employed in my school from to		to	,; and		
	(b) on first appointment as a Native-speaking English Teacher under the Enhanced NET Scheme in Secondary Schools.					
2.	The grant of a salary advance of I	is approved.				
3.	Repayment in six equal monthly (month/ye		each should be effected from			
Si	gnature of supervisor/principal*:		Date:			
Na	ame of supervisor/principal*:	Mr./Mrs./Ms./Miss.	*			
Na	nme of school:					
PA]	RT IV (To be completed by the F	unds Section, the Ed	lucation Burea	u)		
То:	Supervisor/Principal of		(School)			
1.	The amount of salary advan	\$ with the due date on				
2.	Repayment will be effected from monthly instalments of HK\$					
Si	gnature:		Date:			
Name:			Post:			

END