

Part D1: Particulars of Department / Section implementing the Project

(If the Project is implemented by the delegated Subsidiary Organisation, please fill in Part D2.)

1. **Name of Department / Section:** (English) _____

(Chinese) _____

2. **Name and position of Head of Department / Section:** (English) _____ (Mr./Ms./Mrs./Miss)*
 (Chinese) _____ (先生/女士/太太/小姐)*

Position _____

3. **Address of Department / Section:** (English) _____
 (Chinese) _____

4. **Telephone no. of Department / Section:** _____

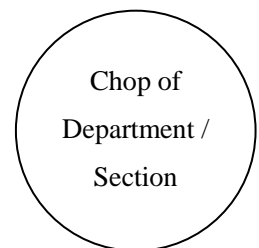
5. **Fax no. of Department / Section:** _____

6. **Email Address of Department / Section:** _____

7. **Website of Department / Section:** _____

8. **Signature of Head of Department / Section:** _____

Date: _____ / _____ / 2023



(*Delete whichever is not applicable)