

Please submit all supporting documents, if any, and this Declaration **by post** with the envelope clearly marked “**i – Journey’ Paid Non-local Study Leave Scheme for Secondary School Teachers (2017/18)**” **within one week** after submitting the Application Form.



***i – Journey’ Paid Non-local Study Leave Scheme for Secondary School Teachers (2017/18)***  
**Programme A(3) – STEM Education**

**Declaration**

I declare that all the information provided in the application form is, to my best knowledge, complete and accurate. If I willfully give any false and/or plagiarised information or withhold any material information in this form, or fail to notify the office concerned of any subsequent change of the information provided, it will render me liable to disqualification for selection or discontinuation of participation in the Scheme, and I may be required to reimburse monies incurred. I understand that my application should be supported by relevant documents/evidence. If I fail to do so, my application may not be processed.

I understand that the personal information solicited in this form is necessary to establish my eligibility and qualifications for the selection process. I consent to the EDB making any necessary enquiries as required in matters relating to the Scheme and for the verification of the information given in my application. I understand and accept that if my application is successful:

- (a) the information furnished, including but not limited to my name, contact details, professional background and initial proposal, may be disclosed upon request to the collaborating institutions and other support organisations for communication and programme engagement purposes; and
- (b) the EDB is authorised to publicise information that contains my name, professional background, and all other materials used during and produced after the Scheme for promotion, recording and reporting, and creating a compendium/resource database for the Professional Learning Communities (PLCs) via public channels including but not limited to publications, websites, and other social media platforms.

I also understand that I must withdraw my application for this Programme A(3) should my previous application for Programme A(1) or A(2) be successful and I decide to accept the place offered on either Programme A(1) or A(2).

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Hong Kong Identity  
Card Number: \_\_\_\_\_

**Checklist**

Please check that you have: (Please insert a “✓” in the appropriate boxes)	<b>Office Use Only</b>
<input type="checkbox"/> emailed the completed Application Form, with separate sheet(s) attached, if any, to <a href="mailto:aaslpd2@edb.gov.hk">aaslpd2@edb.gov.hk</a> <b>on or before 2 January 2018.</b>	<input type="checkbox"/>
<input type="checkbox"/> attached a copy of your Hong Kong Identity (HKID) Card with this Declaration	<input type="checkbox"/>
<input type="checkbox"/> attached copy/copies of documentary proof(s), if any, listed in the Application Form with this Declaration.	<input type="checkbox"/>
<input type="checkbox"/> made arrangements for the Recommendation Form to be completed by the Principal and returned to the Education Bureau by <b>2 January 2018.</b>	<input type="checkbox"/>