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**English Language Enhancement Programme for Kindergarten Teachers –  
Level Two (2022/23)  
Application Form**

**I. Personal Particulars**

Name of Applicant: (English) \_\_\_\_\_ (Chinese) \_\_\_\_\_

HKID No.: \_\_\_\_\_ Teacher Registration No.: \_\_\_\_\_

Post Title: \_\_\_\_\_ Years of Teaching Experience in Kindergartens: \_\_\_\_\_

Contact Tel No.: \_\_\_\_\_ Contact Email Address: \_\_\_\_\_

**II. Information of Serving School**

Name of Serving School: \_\_\_\_\_

School Code: \_\_\_\_\_ School Tel No.: \_\_\_\_\_

**III. Declaration**

I confirm that the information on this application form is accurate and correct, and understand that my data will be shared with CIHE, SCOLAR or related parties of the Education Bureau for administration and other related purposes.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_