



香港聖約翰救護機構

Hong Kong St. John Ambulance

香港麥當勞道二號 聖約翰大廈 St. John Tower, 2 Macdonnell Road, Hong Kong

24 小時緊急救護車熱線: 香港 (HK) 2576 6555

電話/傳真號碼: 2530 8006-8/2515 0205

理事會 (Council)

24-hour Emergency 九龍 (KLN) 2713 5555

Tel / Fax No.: 2530 8020-4/2976 0457

救傷會 (Association)

Ambulance Services: 新界 (NT) 2639 2555

2530 8032-4/2530 2727

救傷隊 (Brigade)

2530 8057-9/2530 4867

見習隊 (Cadet)

Result Enquiry Application Form

01/05

To: Senior Training Officer,
St. John Ambulance Association.

Name of Applicant : (*Mr/Miss/Ms) _____

(In Block Letters)

(In English)

(Chinese, if applicable)

I.D. Card No.: _____ Day-time Contact No.: _____

Correspondence Address : _____

_____ Fax No.: _____

Course Code : _____ Examination Date : _____

The reason for the application : _____

Signature : _____ Date : _____

* Please delete as appropriate

Remarks:

1. On completion of this form, please return it by post with a crossed-cheque for HK\$50 payable to "Hong Kong St. John Ambulance" for the application fee **HK\$50. (non-refundable)**
2. Please enter your name and address in all spaces provided below and provide us with a self-address stamped (\$1.40) envelope for further correspondence.
3. The personal data provided by means of this form will be used for result enquiry. The provision of personal data by means of this form is voluntary. If you do not provide sufficient information, we may not be able to process your application.
4. Enquiries concerning the personal data collected, including the making of access and corrections, could be sent in writing to : "Association Section, 4/F., Hong Kong St. John Ambulance Headquarters, St. John Tower, 2 MacDonnell Road, Hong Kong." A handing charge for HK\$50 will be charged.

Office Use Only

Cash / Cheque : \$ _____ Cheque No.: _____ Bank: _____

*Accepted / Not Accepted Reason: _____

Certified by Senior Training Officer: _____ Date : _____

(Enter your name and address in all spaces provided below for your future correspondence)

Name: _____ Name: _____

Address: _____ Address: _____
