Requisition for Chinese Written Paper

To: Training Manager
St. John Ambulance Association

Name of Applicant: (*Mr/Miss/Ms) __________________________
(In English) (Chinese, if applicable)

H.K.I/D No.: __________________________ Daytime Contact Tel. No.: _____________________
Course Ref. No.: _______________________ Exam. Date: ________________________________

I would like to request a Chinese written paper on the day of Examination: _____________________
* Please delete as appropriate (Date of Examination)

Reasons: __________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Signature of Applicant: __________________________ Date: ___________________________

Remarks:
1. Application with payment must reach the Association Office at least 14 days prior to the Examination.
2. HK$50 would be charged as handling fees (non-refundable). Payment can be made by cash or by crossed
   cheque payable to "Hong Kong St. John Ambulance". (Please do not mail cash)
3. Please provide us with a self-address stamped ($2) envelope.
4. The personal data provided by means of this form may be disclosed to our association staff for processing
   application for Chinese written paper admission purposes. 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.
5. Enquiries concerning the personal data collected, including the making of access and corrections, can be
   sent in writing to: Hong Kong St. John Ambulance, c/o Association Section, 4/F St. John Tower, 2
   MacDonnell Road, Hong Kong. A handling charge for HK$50 will be charged.

For Office Use Only

Cash / Cheque: $________ Cheque No.: _________ Bank: ____________________________

Certified by Training Manager: ____________________ Payment Date: ________________

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

Name ______________________________ Name ______________________________
Address ______________________________ Address ______________________________