Pro-Act Training and Development Centre [Welding]

L7, 13-19 San Kwai Street, Kwai Chung, N.T., H.K.

Tel: 2449-1374 Fax: 2481-2771 Email: pawe@vtc.edu.hk

Applica	ation Form (Part-time	Course	s)	
Name of Course :			For Official Use Only Application No. : Vetting of Documents :		
Course Code :			Class Commencement Date : Processed by : Note		
Name of Applicant (English)			(Chinese)	Sex	Age
	ne)		(Mobile/Pager)		
Employment	Please provide proved document				
Record (in reverse chronological order)	Name of Comp	<u>oany</u> (<u>N</u>	<u>From</u> Month/Year) /	<u>To</u> (Month/Year) /	Last Position Held
	2.		I	1	
	3.		I	1	
Declaration of Applicant 1. I declare that the information given in this application is, to the best of my known and complete. I authorise Vocational Training Council (VTC) to use this information my application for admission to the programme. I also understand that provision or misleading information therein shall lead to DISQUALIFICATION of application notice and cancellation of any resultant registration, and any fees paid will NO 2. I understand that, upon my registration in a programme in VTC, the data contant application form will become part of my student record and may be used for all relating to my study in VTC. I understand that VTC may use my application datangurposes. The application form and other related personal information will be after the admission exercise. 3. Applicant has a right to request access to and correction of his/her personal description.					information to process provision of any false oplication without will NOT be refunded. In contained in this d for all purposes ion data for statistical will be disposed of sonal data. Such
	request may be made to the VTC Pro-Act Training and Development Centre (Welding). Applicant's Signature: Date:				
	Applicant 5 Orginatur.	·			
Name: Name:				correspo	l in your name and ondence address