

## Quality Assurance Sections Quality Assurance Division, Education Bureau

### *Application Form for Serving as External Reviewer*

The completed application form should be sent via the applicant's supervisor in the employing school, by post to **Quality Assurance Sections, Quality Assurance Division, Education Bureau at Room 1602, 16/F Crocodile Centre, 79 Hoi Yuen Road, Kwun Tong, Kowloon**, or by fax to 2117 0748.

#### **PART I : To be completed by the applicant**

Personal Particulars				
Name in English : *Dr/ Mr/ Mrs/ Ms/ Sr				
(Surname)		(Other names)		
Name in Chinese :		Post :		
Substantive Rank : *PI/ PII/ PGM/ SEO/ HMI/ HMII/ SPSM/ Others (Please specify)				
Residential Area :		HKID No. :		
Contact Tel. :		(Office) (Mobile)		E-mail (Note) :
Parent School				
Name of School :				
School Type : * Primary/ Secondary/ Special/ Through-train School				
School Number (6-Digit) :				
Post-Secondary Academic and Teacher Qualifications				
Qualification Obtained	Major/ Minor/ Elective Subjects	Name of School/ Institute	Year of Award	
Experience in the Education Profession			Teaching Duties	Functional Post(s)
Name of School (Up to the current school year)	Post(s)	Period of Service (mm/yy - mm/yy)	Major Subjects and Levels Taught	(e.g. Panel Head, Prefect of Studies )
		/ - /		
		/ - /		
		/ - /		
		/ - /		
Previous Secondment to the Education Bureau/ Education & Manpower Bureau/ Education Department [Please indicate the Section(s) attached to and period(s) of service.]				
Previous training for External Reviewers				
Did you receive training for External Reviewers before?				
* Yes (Please indicate the year of training: _____) / No				
Preference on Report Writing				
Are you willing to write an English report? * Yes / No				

**Note:** Acknowledgement receipt of your application will be sent to you by email

**PART II : Declaration and undertaking by the applicant**

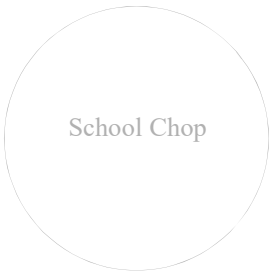
The information I have provided in this application is accurate to the best of my knowledge.

I understand that:

- (a) I have to receive relevant training before serving as an External Reviewer; and
- (b) I have to serve as an External Reviewer to promote collegial participation in External School Review.

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

**PART III : To be completed by the applicant's school supervisor**

Supervisor's Remarks	
<p>I *support/ do not support this application.</p>	
	<p>Signature : _____                      (Name : _____ )                      (School Supervisor)</p>
<p>Name of School : _____</p>	
<p>Date: _____</p>	

\* Please delete as appropriate.

## Personal Information Collection Statement

### Purpose of Collection

1. The personal data provided by you in this form will be used by the EDB for one or more of the following purposes:
  - (a) Activities relating to the processing, authentication and counter-checking of application for serving as an External Reviewer;
  - (b) Activities relating to matching of the personal data with the database of other relevant Government bureaux/departments in connection with the processing, authentication and counter-checking of the application mentioned in (a) above;
  - (c) Activities relating to matching of the personal data within the database of EDB for purposes of verifying/updating records of the EDB;
  - (d) Activities relating to training and development including invitation of participation in programmes/activities, applications for reimbursement of course fees, assessment of nominations, awards and scholarship, and monitoring of attainment progress;
  - (e) Activities relating to the processing and vetting of applications for, and disbursement of, funding/grants /subsidies, and conducting of audits;
  - (f) Activities relating to compilation of statistics, research and Government publications; and
  - (g) Activities relating to the administration and enforcement of rules and regulations including The Education Ordinance (Cap. 279), its subsidiary legislation (such as the Education Regulations and the Grant/Subsidized Schools Provident Fund Rules) and the Codes of Aid.
2. The provision of personal data required by this form and during the processing of this form is obligatory. In the event that you do not provide those personal data, we may not be able to handle or further process the application.

### Classes of Transferees

3. The personal data you provide will be made available to persons working in EDB. Apart from this, they may be transferred or disclosed to the parties or in the circumstances listed below:-
  - (a) other Government bureau and departments for the purposes mentioned in paragraph 1 above;
  - (b) the school in which the form relates for the purposes mentioned in paragraph 1 above;
  - (c) where you have given your prescribed consent to such disclosure; and
  - (d) where such disclosure is authorised or required under the law or court order applicable to Hong Kong.

### Access to Personal Data

You have the right to request access to and correction of your personal data held by EDB. Request for access or correction of personal data should be made in writing to Chief Quality Assurance Officer 1, Quality Assurance Sections, Quality Assurance Division, Education Bureau at Room 1602, 16/F Crocodile Centre, 79 Hoi Yuen Road, Kwun Tong, Kowloon.