

Application Number: \_\_\_\_\_ (*Official use only*)



**Pilot Project on “i-Journey” Scholarship (2024/25)**

**Recommendation Form**

Teacher Applicant

**Notes on Completion of this Recommendation Form:**

1. Applicants who are serving teachers should ask their school principals to complete and submit this Recommendation Form.
2. This Recommendation Form should be submitted to the Education Bureau (EDB) by post or in person to the following address **on or before 31 March 2025**.

School Leadership and Professional Development Section  
Education Bureau  
5/F, East Wing, Central Government Offices  
2 Tim Mei Avenue  
Tamar, Hong Kong  
(Attn: PO(SLPD)1)

Please mark ***Recommendation Form (Teacher) – Pilot Project on “i-Journey” Scholarship (2024/25)*** on the envelope. Recommendation Forms submitted in person must reach the above address **on or before 5:00 p.m. on 31 March 2025**. For Recommendation Forms submitted by post, the date of postmark must not be later than **31 March 2025**.

**Section A: Applicant's Personal Particulars**

Please provide details of the applicant in the table below.

Name in English	
Name in Chinese <i>(if applicable)</i>	

**Section B: Provision of Comments for the Applicant**

Please provide comments on the applicant. Please attach additional sheets, if necessary.

<p>a) Please insert a “√” in the appropriate box.</p> <p><input type="checkbox"/> I <b><u>recommend</u></b> this applicant and agree to release him/her from duty to attend overseas training and any sharing session(s) for dissemination.</p> <p><input type="checkbox"/> I <b><u>do not recommend</u></b> this applicant.</p>
<p>b) Please provide overall comments on the applicant's performance in school.</p>

c) Please insert a “✓” in the appropriate box.

I confirm that this applicant is a full-time regular / contract teacher\* of my school in the 2024/25 school year.

I confirm that this applicant has no records of professional misconduct and punishment imposed by EDB and/or my school.

\* Please delete as appropriate.

Signature of School Principal: \_\_\_\_\_

Name of School Principal: Mr / Mrs / Ms / Dr\*

School Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

*(This email address will be used for notification of the application result.)*

Date: \_\_\_\_\_

\* Please delete as appropriate.

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