社會工作者註冊局 SOCIAL WORKERS REGISTRATION BOARD

投訴表格 COMPLAINT FORM

如對填寫此表格有任何問題或需要協助,請與註冊局辦事處聯絡。
If you have any questions in filling out this Form, please contact the Board Office.

電話 Phone No.: 2591 1955

地址 Address

電郵 Email: info@swrb.org.hk

香港筲箕灣南安街 83 號海安商業中心二十七樓

網址 Website: www.swrb.org.hk | 27/F, Eastern Commercial Centre, 83 Nam On Street, Shau Kei Wan, Hong Kong

請按照下列指示和注意事項填寫此投訴表格:

- 1) 此投訴表格乃根據《社會工作者註冊條例》(第 505章)("條例")第25(3)條規定而制訂的指 明表格。所有投訴須以此指明表格提出。
- 2) 閣下在遞交此投訴表格時,<u>須同時夾附一份法</u> 定聲明,聲明盡閣下所知及所信此投訴表格所 載的詳情是真實正確的。該等聲明的指明表格 及填寫指引見第9頁。
- 3) 閣下須以正楷清晰地填妥投訴表格內各欄目· 並提供正確無訛的資料。如此表格不敷應用· 請另紙詳列有關資料,隨投訴表格一併提交。
- 4) 請於投訴表格提供閣下的個人資料。凡匿名、 或投訴人的身分不能識別、或投訴人的下落不 能追查、或投訴表格尚未填妥的投訴,註冊局 概不受理。
- 5) 閣下須提供該等事件發生的日期。如果閣下填 寫此投訴表格時,所投訴的事件已於兩年前發 生,請解釋為何延遲至今才作出此投訴。
- 6) 閣下必須把投訴的內容分段填寫,並以數目字 清楚分段。每段須只包含一項投訴。假若閣下 因將兩項或更多投訴事項放在一段之內,而引 致社會工作者註冊局在處理該段投訴事項時有 任何遺漏,註冊局概不負責。
- 7) 閣下所提供的資料僅供註冊局用於與該投訴有關的用途。閣下乃自願提供閣下的個人資料。 註冊局可能在法例授權或准許下,向其他人披露或轉移部分或全部資料。註冊局職員、委員會或經授權的人員在處理閣下投訴時或會取得該等個人資料。
- 8) 根據條例第 25(3)條的規定·閣下的投訴將呈交由兩位註冊局成員("兩位成員")初步考慮。兩位成員將根據條例第 25(3)條的規定·決定是否將閣下的投訴·或閣下的部分投訴轉介註冊局。
- 9) 兩位成員在初步考慮閣下的投訴時,可指示閣下對提供的資料作出進一步的澄清、補充,或該兩位成員認為必要的其他指示。兩位成員可在認為恰當時,尋求第三方的意見和協助,並就閣下的投訴或部分投訴準備一份投訴摘要。如兩位成員決定轉介該投訴或部分投訴予註冊局,上述投訴摘要將被用於相關的紀律程序,供註冊局、紀律委員會或被投訴的註冊社工及其代表參考,以促進紀律程序的順利進行。
- 10) 如閣下提供文件的副本或非正本文件作為證據 文件,兩位成員、紀律委員、註冊局或被投訴的 社工可能會要求閣下提供該等文件的正本以供 查閱。紀律委員會主席有酌情權決定是否採納 任何文件副本或非正本文件作為聆訊用的證 據。
- 11) 閣下所呈交有關投訴的全部資料的副本,將交給被投訴的註冊社工作答辯。

This specified Complaint Form is prescribed under section 25(3) of the Social Workers Registration Ordinance (Cap. 505) ("the Ordinance"). All complaints must be lodged in this specified form.

This specified Complaint Form shall be submitted together with a statutory declaration confirming that the particulars contained in this specified Complaint Form are true and correct to the best of your knowledge and belief. The specific form of the said statutory declaration and relevant guidance can be found in page 9.

You are required to fill out the various fields of the Complaint Form in a clear and legible manner and provide accurate and true information. Please use additional sheet(s) and attach it to this Form if the space is insufficient.

Please provide your personal particulars in the Complaint Form. The Board shall not deal with any complaint that is made anonymously, or when the complainant cannot be identified or traced, or if the form is not duly completed.

You must give the date(s) when the complained event(s) occurred. If you are making a complaint which occurred at a date more than two years from the date you fill in this Complaint Form, you must explain the special reasons which account for your delay in lodging this complaint.

You must put down the content of the complaint in separate paragraphs and number the paragraphs consecutively. Each paragraph must so far as convenient contain one complaint only. Where there are two or more complaints incorporated in one single paragraph, the Social Workers Registration Board shall not be held responsible for any omission of dealing with more than one complaint in one paragraph.

The information provided will only be used for purposes which are 1 related to your complaints. The provision of personal data is voluntary. — The Board may disclose or transfer any or all of such information to any third party provided that the disclosure or transfer is authorized or permitted by law. It may be accessible to officers, committees or other persons authorized to receive information in the processing of the complaint.

In accordance with Section 25(3) of the Ordinance, your complaint will be submitted to two members of the Board ("the Two Members") for initial consideration. The Two Members will decide whether to refer your complaint or part of your complaint to the Board in accordance with Section 25(3) of the Ordinance.

When considering your complaint, the Two Members may direct you to make further clarification, to provide further information or may give any other direction the Two Members think necessary. The Two Members may seek advice and assistance from the third party to prepare a Summary of the Complaint in respect of your complaint or any part of your complaint. If your complaint or any part of your complaint is referred to the Board by the Two Members, such Summary of the Complaint will be used in the relevant disciplinary proceedings and will be used by the Board, relevant disciplinary committee or the registered social worker being complained or his/her representative for their reference to facilitate the relevant disciplinary proceedings.

If any photocopy or non-original document is adduced as documentary evidence, the Two Members, the relevant disciplinary committee, the Board or the registered social worker being complained may require you to provide the original of such document for inspection and verification. The presiding member of the Disciplinary Committee has a discretionary power to accept the photocopies or non-original documents as evidence.

All the information relating to the complaint provided by you will be copied to the registered social worker being complained for preparing for a defence.

甲部: 提出投訴人士資料

Part I: Particulars of Complainant

若提出投訴人士多於一位,請於(2)部提供其他提出投訴人士的資料。
If there is more than 1 complainant, please provide particulars of other complainant in (2) below.

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乙部:被投訴註冊社工的資料

Part II: Particulars of Registered Social Worker(s) being complained

若被投訴的註冊社工多於一位,請提供所有被投訴社工的姓名及有關的資料。

If there is more than one registered social worker being complained, please provide all the names and relevant information.

姓名 (先生 / 女士 / 小姐) Name (Mr./Mrs./Ms.)	
註冊編號(如有) Registration number (if known)	
涉案的服務機構名稱(如有) Name of the service agency (if any)	
如閣下知悉被投訴註冊社工的聯絡 If you have the contact information the following blanks:	方法,請於以下空位填入該資料: n of the registered social worker being complained, please provide it in
聯絡電話號碼 Contact Tel. No.	傳真號碼 Fax. No.
聯絡地址 Correspondence Address	
姓名 (先生 / 女士 / 小姐) Name (Mr./Mrs./Ms.)	
註冊編號(如有) Registration number (if known)	
涉案的服務機構名稱(如有) Name of the service agency (if any)	
如閣下知悉被投訴註冊社工的聯絡 If you have the contact information the following blanks:	方法,請於以下空位填入該資料: n of the registered social worker being complained, please provide it in
聯絡電話號碼 Contact Tel. No.	傳真號碼 Fax. No.
聯絡地址 Correspondence Address	

丙部:投訴內容

Part III: The Complaint

本人 / 我們現向社會工作者註冊局作出投訴,詳情如下:

I / We hereby lodge a complaint to the Social Workers Registration Board. Details of the complaint are as follows:

投訴事件的發生日期

Date of the alleged offence being complained occurred

(如填寫此投訴表格時,閣下所知悉的投訴的事件已發生超過兩年,請解釋延遲作出投訴的原因。 If the alleged offence being complained occurred at a date more than two years from the date you fill in this

Complaint Form, please explain the reasons which account for your delay in lodging this complaint.)

投訴事件的發生地點

Place of the alleged offence being complained

所投訴的違紀行為

The disciplinary offence(s) complained of

填寫時請參考《社會工作者註冊條例》(第505章)第25(1條

Please refer to section 25(1) of the Social Workers Registration Ordinance (Cap. 505)

丙部:投訴內容(續)

Part III: The Complaint (continued)

投訴事件的詳細始末

Details of the alleged offence being complained

請說明與此投訴相關的事實,並參照本表格中所提供的文件證據(如有),指明閣下用於證明上述事實的證據。 (如此表格不敷應用,請另紙書寫並連同此表格一併提交。)

Please set out the facts which give rise to the allegations and identify the evidence upon which you rely to prove those facts, by reference to documentary evidence provided in this form (if any) where appropriate. (Please use and attach additional sheet(s) to this Form if the space is insufficient.)

丙部:投訴內容(續)
Part III : The Complaint (continued)
投訴事件的詳細始末(續) Details of the alleged offence being complained (continued)
請說明與此投訴相關的事實,並參照本表格中所提供的文件證據(如有)·指明閣下用於證明上述事實的證據。 (如此表格不敷應用,請另紙書寫並連同此表格一併提交。) Please set out the facts which give rise to the allegations and identify the evidence upon which you rely to
prove those facts, by reference to documentary evidence provided in this form (if any) where appropriate. (Please use and attach additional sheet(s to this Form if the space is insufficient.

丙部: 投訴內容(續)
Part III : The Complaint (continued)
支持有關投訴的證明文件
Supporting document(s) of the complaint
請閣下列明所有附錄於此投訴表格中以支持此投訴的文件作為文件證據。如閣下無任何文件證據,請將此部分留空。
Please list out all documents you would like to annex to this form to support your case as documentary evidence. If there is no documentary evidence, please leave this part blank.

丁部:聲明及同意

Part IV: Declaration and Consent

本人/我們謹聲明上述資料正確無訛。

I/We declare that the information provided by me/us in this form is true and correct to the best of my/our knowledge.

本人/我們同意此投訴及所提供的證據,將交由兩位成員審閱,並在適當的情況下,兩位成員可尋求第三方的意見和協助,就本人/我們的投訴準備一份投訴摘要。本人/我們同意如兩位成員決定轉介全部或部分投訴予註冊局,上述投訴摘要將被用於相關的紀律程序,供註冊局、紀律委員會或被投訴的註冊社工及其代表參考,以促進紀律程序的順利進行。

I/We agree that this complaint and the supportive evidence provided would be examined by the Two Members and, where appropriate, the Two Members may seek advice and assistance from the third party to prepare a Summary of the Complaint. I/We agree that if all or part of the complaint is referred to the Board, such Summary of the Complaint will be used in the relevant disciplinary proceedings and will be used by the Board, relevant disciplinary committee or the registered social worker being complained or his/her representative for their reference to facilitate the relevant disciplinary proceedings.

本人/我們同意此投訴及所提供的證據將用於此投訴所聲稱的違紀行為的有關紀律程序,而資料的副本將交予被投訴的社工作答辯之用。

I / We agree that this complaint and the supportive evidence provided would be used in the disciplinary proceedings relating to the alleged disciplinary offence and copied to the registered social worker being complained for preparing for a defence.

<u>主要提出投訴人士</u> Principal Complainant	其他提出投訴人士 Other Complainant	
—————————————————————————————————————	簽署 Signature	
姓名 Name		
日期 Date	 日期 Date	

閣下在遞交此投訴表格時,請確定已夾附相關法定聲明 [有效期為一個月] 。閣下應保留一份已填妥的投訴表格副本,以備參考。 Please make sure this Complaint Form is submitted together with the statutory declaration (valid for 1 month). You are advised to keep a copy of the completed Complaint Form for reference.

社會工作者註冊局 Social Workers Registration Board

用於根據社會工作者註冊條例第 25(3)條規定,在提出投訴時需作出的法定聲明的指明表格
The forms specified for making statutory declaration for use of making a complaint in accordance with Section 25(3) of the Social Workers Registration Ordinance (Cap. 505)

指明表格:

- I. 在香港政府民政事務處監誓員面前作 出的聲明,請使用民政事務總署編號 "HAD 5"表格。詳情請參閱下列要求。
- II. 在香港的執業律師或太平紳士面前作出的聲明,使用背頁所示的表格。切勿以此表格作為"HAD 5"表格的附件使用。
- III. 用於提出投訴的聲明,有效期為一個 月。
- IV. 於香港以外地區所作出的聲明,須由 當地的中華人民共和國領事館官員加 簽;若當地沒有設置領事館,可由當 地具同等職權及獲香港法庭接納的機 構加簽。

聲明中需包括以下資料:-

- 1. 聲明人的姓名;
- 2. 聲明人的香港身份證號碼;
- 3. 聲明人的住址;
- 4. 關乎提出投訴的聲明;

就上述第4項作出的聲明:

- 1. 本人於 _____(日期)按照社會工 作者註冊局提供的指定格式存檔投 訴表格(下稱"投訴表格"),投訴名 為_____(姓名)的註冊社會工作 者。

The Forms:

- Use the form no. "HAD 5" of the Home Affairs Department of the Hong Kong Government to make the declaration before the Commissioner for Oaths at its District Office. Please refer to the following sections for requirements in details.
- II. Use the form shown overleaf to make the declaration before a practicing solicitor or a Justice of Peace in Hong Kong. DO NOT use it as attachment to the "HAD 5" form.
- III. The Declaration once made is valid for a period of one month to support the lodging of a complaint.
- IV. Declaration made elsewhere outside Hong Kong should be authenticated before a consular officer of the Peoples' Republic of China in the foreign countries, or in their absence before an equivalent authority deemed acceptable to the courts in Hong Kong.

The Declaration shall include the following information:-

- 1. Name of the declarant;
- 2. Hong Kong Identity Card number of the declarant;
- 3. Residential address of the declarant:
- 4. A statement on the lodging of a complaint;

Clauses for item 4 above:

- 1. On ______ (date), I have made a complaint ("the Complaint") against the registered social worker(s) named ______ (name) by submitting a complaint form ("the Complaint Form") in the specified form provided by the Social Workers Registration Board ("the Board").
- 2. The facts and particulars contained in the Complaint Form are true and correct to the best of my knowledge and belief.

(姓名),現居於

請刪去不適用的文字

HAD 5(S) Rev. 1/2019

(地址),謹以至誠鄭重聲明:

- 1. 本人於 20xx年x月x日按照社會工作者註冊局提供的指定格式存檔 投訴表格(下稱"投訴表格"),投訴名為李小明的註冊社會工 作者。
- 2. 盡我所知及所信投訴表格所載事實和詳情是真實正確的。

		**************************************	明人簽署)
此項聲明是於		/日次香港,行政區人	
#是經由	(姓石),		作出傳譯者,而
傳譯員亦已先行聲明/宣 本人即將為聲明人主持的	_~~~ /	文件內容的聲明人作出真實明確 人。	及清晰可聞的傳譯,並會
A TAN	ing the di	在本人面前作出,	
The state of the s	Makille	監誓員:	
A The for	(姓名)	,現居於	
14000	ر الماطلان	,謹以至誠鄭重聲明/謹此宣誓*,	
1 20x	(JT/JE)	,谁以干视别里宜归/ 谁以且言 ',	44 /\nex:\\+ \x \\\\\\\\\
		,建以主讽의里军仍/ 建此旦言 , 文件内容向聲明人	
法	語,本人已將本		
法文建文及	語,本人已將本	文件內容向聲明人	
法 是 更文及 明確及清晰可聞的傳譯,	語,本人已將本 並會將即將為其主持	文件內容向聲明人 的聲明忠實向其傳譯。 (係	(姓名)作真覧 (姓名)作真覧 [姓名] [李] [李] [李] [李] [李] [李]
法被害文及 明確及清晰可聞的傳譯,	語,本人已將本 並會將即將為其主持	文件內容向聲明人 的聲明忠實向其傳譯。	(姓名)作真§
法证据文及 明確及清晰可聞的傳譯, 此項聲明/宣誓*是於	語,本人已將本 並會將即將為其主持	文件內容向聲明人 的聲明忠實向其傳譯。 (係	(姓名)作真質 (姓名)作真質 [姓名] [李] [李] [李] [李] [李] [李]

DECLARATION

I,	Chan Tai Man	(name), of	Room 123 XX House, XX Estate
Ng	au Tau Kok, Kowloon	(address), sole	mnly and sincerely declare that:

- 1. On X Month 20xx, I have made a complaint ("the Complaint") against the registered social worker(s) named Lee Siu Ming by submitting a complaint form ("the Complaint Form") in the specified form provided by the Social Workers Registration Board ("the Board").
- 2. The facts and particulars contained in the Complaint Form are true and correct to the best of my knowledge and belief.

And I make this solemn declaration con	nscientiously believing the same to	be tructend by Virtue of	of the Carrie
Declarations Ordinance.	∠	A DO	Spart
	The state of the s	(signature of declar	arant)
Declared at	in the IKSAR ors	of	20_
#through the interpretation of	name of S		
interpreter having been also first declared	That he/she* Hod ruly, distinctly	(address and occu y, and audibly interpre	ipation), the ted the cont
of this document to the declarant	h she* would truly and faithfully	interpret the declara	tion about
administered to him/her*.#	in the TKSAR bis (name of the standard of the	Before me,	
The sable for it.	(name) of	Commissioner for	Oaths
, V.S.	·····		
the office language in which this document			
day dage and that I have truly, distinctly, a	• •		
(name	e), and that I will truly and faithfull	y interpret the declara	tion about t
administered to him/her*.			
		(signature of inter	
Declared/Sworn* at	in the HKSAR this	day of	20_
		Before me,	
		Commissioner for	Oatns"

For use of making a complaint in accordance with section 25(3) of the Social Worker Registration Ordinance (Cap. 505)

用於根據《社會工作者註冊條例》第 25(3)條作出投訴

This form shall NOT be used as attachment to Declaration made before Commissioner for Oaths at the Home Affairs Department of the Hong Kong Government

此表格不應作為於香港政府民政事務處監誓員前所作出聲明的附件使用

DECLARATION	聲明
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l,				dentity Card No.:	
本人	in print 姓		州持有的省 港	违身份證號碼為 :	 (The number 號碼)
residing at	, p <u>X</u>				(
現居於				0.77	
solemnly and sincerely 以至誠鄭重聲明:	declare as		(Residential a	ddress (主址)	
worker(s) named specified form pr	ovided by t (日期)按	(name) b he Social Worker 照社會工作者註	y submitting a s Registration 注冊局提供的	a complaint form ("the Board").	ainst the registered socia e Complaint Form") in the 格(下稱"投訴表格"),
The facts and paknowledge and b 盡我所知及所信	elief.		·		orrect to the best of m
	a. 本人謹憑	藉《宣誓及聲明	月條例》衷誠	作出此項鄭重聲明,	y virtue of the Oaths an 並確信其為真確無訛。
Declared in: 作出聲明所在地:	(Please s	pecify the count	ry or region	請註明國家或地區)	
At: 地址:					
On: 日期:	(day	(month 月)	(year 年)		
	日)		Before	me 在本人面前作出	,
Signature of the	e Declarant	聲明人簽署		Signature of *Solicitor *執業律師/太 ease delete as appropr	
				(Name in print	<i>姓名正钧</i>)