

社會工作者註冊局

SOCIAL WORKERS REGISTRATION BOARD

香港筲箕灣南安街 83 號海安商業中心 27 樓 | 27/F Eastern Commercial Centre, 83 Nam On Street, Shau Kei Wan, Hong Kong. 電話 Tel: 25911955 | 電郵 Email: Info@swrb.org.hk | 傳真 Fax: 25911411

【通知及呈報表格】 NOTIFICATION & REPORTING FORM

社會工作者註冊條例(第 505 章) Social Workers Registration Ordinance (Chapter 505)

甲部 Part A: 註冊社會工作者個人資料 Personal Particulars of the R		
姓名(依現時註冊紀錄冊所載)Name (as currently shown on Register)		註冊編號 Registration no.
		Registration no.
	(名字 Other name)	
フ部 Part R・註冊紀錄冊	所載的資料 Information on the Register	•
	が戦力が見れれることを The Register Note 1:The information will be made available for public insp	voction
注 2 :註冊社工可自選一個可供公	公眾查閱・並讓註冊局可親身送達信件的地址作為註冊地域	业.該地址毋須為住宅地址。Note 2:The address need
	RSW but at his/her own choice the one that will be used for p	ublic inspection and as well as the address in any matter
allowing personal delivering in dischar 註 3 :請附上相關證明文件的影印	rging duties of the Board. 『本。Note 3:Please attach with a photocopy of the support	ting document(s) in relation to the item(s).
	變更為 To be changed as	
英文姓名(註 1 & 3) Name in English(Note 1 &3)		
中文姓名(註 1 & 3)		
Name in Chinese (Note 1 &3)		
註冊地址(註 1 & 2)		
Registered Address (Note 1 &		
	ve date of change to above : /	/ (日/月/年 dd/mm/yyyy)
	New qualification on which the registration is bas	
│ │ │ 別持月獲認可的任宵上1 │	作學歷 (註 3) Recognized social work qualification	held (Note 3)
名稱 Title:		頒發年份 Year of Conferment:
	驻 3) Social work post occupied (Note 3) <i>(只適用於</i> 為	亨2 類註冊社工 applicable to Cat. 2 RSWs only)
僱用機構 Employing agency	:	
職位 Post:	履新日期 Start Date:	/ (日/月/年 dd/mm/yyyy)
		/ \H /3 we
	註3) Charge or Conviction (Note 3)	
被檢控或定罪的日期 Date of		/ (日/月/年 dd/mm/yyyy)
□ 被檢控罪行 Charged with □ 在香港 In Hong Kong		ffence Isewhere outside Hong Kong
口 任日心 川口のほんのち		Sewhere outside frong Kong
控罪條文 Statement of the	offence :	
判罰 Sentence:		
利司 Semence .		
丁部 Part D:其他 Others	S	
新電郵地址 New email address		
新聯絡電話號碼		
	流動電話號碼 Mobile phone no.:	
New Contact phone no.	其他電話號碼 Other phone no.:	
サヴ Dawle ・ 設明 Daylaw		
戊部 Part E:聲明 Declar 「未人藉此向社會工作老註冊局	ation 	
註3項目的要求,附上相關語]金牛八川州汉川旧,均央县工唯,中八亚山区
I hereby declare and confirm to the Social Workers Registration Board that all information which I have provided with and		
for this notification or report are true and correct to the best of my knowledge and belief. I also attach herewith a photocopy of the supporting document(s) in relation to the item(s) notified or reported hereby marked with note 3.		
photocopy of the supporting	g document(s) in relation to the item(s) notined t	or reported hereby marked with hote 5.
 簽署:	Signature 日期 Da:	te (日/月/年 dd/mm/yyyy)