

Baptist Oi Kwan Social Service

Application Form for Internet of Girls Sham Po Community Housing Project

Notes:

1. The applicant shall first understand and agree to the project concept, eligibility, and rules of the applied project.
2. The applicant may fill in the required information through the online application, or may download this Form and submit the application in person or by post to the service operator of the applied project, or by post to The Hong Kong Council of Social Service with the contact address of Room 505, 5/F, Harcourt House, 39 Gloucester Road, Wan Chai, Hong Kong.
3. The Hong Kong Council of Social Service hereby reserve its right to change, update and/or amend any contents and parts of this Application Form at any time without giving prior notice to the applicant. The Hong Kong Council of Social Service will not be liable to the applicant or any third party for any changes, updates and/or amendments to the Application Form.
4. Upon receipt of the application, the service operator will contact the applicant to provide supporting documents and make appointment for an interview. If the applicant has not received any form of notice from the service operator within one month, the application will automatically be reserved as a candidate in the waiting list.
5. With respect to any dispute arising in the application process, the Hong Kong Council of Social Service and its service operator of the Community Housing Movement reserve and have the rights for final decision.

Part I Applicant Information*

Name (In Chinese): _____ (Surname) _____ (Given Name)	English Name:	Telephone number:	Hong Kong ID Card: (First four numbers, including English characters A1234)
Address:	District:	Length of residence in Hong Kong _____ (month)	

Part II Current Residence Status*

Residence type: <input type="checkbox"/> Permanent independent unit <input type="checkbox"/> Temporary independent unit <input type="checkbox"/> Sharing unit (cubicle apartment/bedspace apartment) <input type="checkbox"/> Independent sub-divided flat <input type="checkbox"/> Others, please specify: _____		
Average rent for the past six months: HK\$ _____	Average water and electricity charges for the past six months: HK\$ _____	Unit area: _____ (square foot)
Current residence status (1-10 points, 1 point refers to the most dissatisfied and 10 points refers to the most satisfied): _____ point(s)		
How many neighbours do you know living in the same building where you live now? _____		

How often do you contact the neighbours you know? <input type="checkbox"/> Never <input type="checkbox"/> Rarely <input type="checkbox"/> Occasionally <input type="checkbox"/> Sometimes <input type="checkbox"/> Often
Do you currently receive any social services? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, please indicate the type of service: _____ for example, family support services, children and youth services, community services or day centre for the elderly)

Part III Application Status for Public Rental Housing*

Are you on the waiting list for public rental housing? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Application number for public rental housing: G- _____ or U- _____	
Application for public rental housing: _____ (year) _____ (month) Total waiting months: _____ (in months)	Selected district: <input type="checkbox"/> Urban District <input type="checkbox"/> Extended Urban District <input type="checkbox"/> New Territories District <input type="checkbox"/> Island District
During the waiting period: 1) <input type="checkbox"/> Have changed <input type="checkbox"/> Have not changed any data on the application form, such as adding/deleting family members, changing the housing allocation plan or the selected district; 2) <input type="checkbox"/> Have gone <input type="checkbox"/> Have not gone to the Hong Kong Housing Authority to accept the investigation relating to the application and conduct the qualification review of housing allocation; 3) <input type="checkbox"/> Have accepted <input type="checkbox"/> Have not accepted the housing allocation arranged by the Hong Kong Housing Authority for _____ times.	

Part IV Information of Family Members and Family Income Status

Number of family members applying for occupancy: _____ *
Applicant* Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Date of Birth: _____ (year) _____ (month) _____ (date) (Age: _____) Identity certification document: <input type="checkbox"/> Hong Kong Permanent ID Card <input type="checkbox"/> Hong Kong ID Card <input type="checkbox"/> Hong Kong Birth Certificate (applicable to people under 11 years old) <input type="checkbox"/> Permits for Proceeding to Hong Kong and Macao (namely One-way Permits) <input type="checkbox"/> Others, please specify: _____ Marital status: <input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Others, please specify: _____ Other status: <input type="checkbox"/> Be pregnant (gestation period: _____) <input type="checkbox"/> Long-term patient/disability <input type="checkbox"/> Child with special educational needs Employment status: <input type="checkbox"/> Full-time (occupation: _____) <input type="checkbox"/> Part-time (occupation: _____) <input type="checkbox"/> Self-Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> At school Average salary for the past six months: HK\$ _____ (per month)
Family member 1 Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Date of Birth: _____ (year) _____ (month) _____ (date) (Age: _____) Identity certification document: <input type="checkbox"/> Hong Kong Permanent ID Card <input type="checkbox"/> Hong Kong ID Card <input type="checkbox"/> Hong Kong Birth Certificate (applicable to people under 11 years old) <input type="checkbox"/> Permits for Proceeding to Hong Kong and Macao (namely One-way Permits) <input type="checkbox"/> Others, please specify: _____ Marital status: <input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Others, please

specify: _____

Other status:

Be pregnant (gestation period: ____) Long-term patient/disability

Child with special educational needs

Employment status:

Full-time (occupation: ____) Part-time (occupation: ____) Self-Employed

Unemployed Retired Housewife At school

Average salary for the past six months: HK\$ _____ (per month)

Family member 2

Gender: Male Female

Date of Birth: _____ (year) _____ (month) _____ (date) (Age: ____)

Identity certification document:

Hong Kong Permanent ID Card Hong Kong ID Card Hong Kong Birth Certificate (applicable to people under 11 years old) Permits for Proceeding to Hong Kong and Macao (namely One-way Permits) Others, please specify: _____

Marital status:

Unmarried Married Divorced Widowed Separated Others, please specify: _____

Other status:

Be pregnant (gestation period: ____) Long-term patient/disability

Child with special educational needs

Employment status:

Full-time (occupation: ____) Part-time (occupation: ____) Self-Employed

Unemployed Retired Housewife At school

Average salary for the past six months: HK\$ _____ (per month)

Family member 3

Gender: Male Female

Date of Birth: _____ (year) _____ (month) _____ (date) (Age: ____)

Identity certification document:

Hong Kong Permanent ID Card Hong Kong ID Card Hong Kong Birth Certificate (applicable to people under 11 years old) Permits for Proceeding to Hong Kong and Macao (namely One-way Permits) Others, please specify: _____

Marital status:

Unmarried Married Divorced Widowed Separated Others, please specify: _____

Other status:

Be pregnant (gestation period: ____) Long-term patient/disability

Child with special educational needs

Employment status:

Full-time (occupation: ____) Part-time (occupation: ____) Self-Employed

Unemployed Retired Housewife At school

Average salary for the past six months: HK\$ _____ (per month)

Average total monthly salary for the past six months: Applicant + All family members = HK\$ _____

Total amount of government subsidy currently being received by the family every month: * If not applicable, please fill in "0".

Comprehensive Social Security Assistance (CSSA) HK\$ _____

Old Age Allowance HK\$ _____

Normal/High Old Age Living Allowance HK\$ _____

Half and Full School Textbook Assistance HK\$ _____

Working Family Allowance HK\$ _____

<input type="checkbox"/> Normal/Higher Disability Allowance HK\$ _____
<input type="checkbox"/> Others, please specify the name and total amount of subsidy received: _____ HK\$ _____
Total monthly salary of applicant and all family member + total amount of government subsidy that all family members are receiving every month): HK\$ _____ (monthly average for the past six months)
Household assets (Hong Kong/domestic/overseas) (relevant supporting documents shall be submitted) * If the family does not have any asset, please fill in "0".
<input type="checkbox"/> Bank deposits HK\$ _____ <input type="checkbox"/> Mandatory Provident Fund HK\$ _____
<input type="checkbox"/> Property HK\$ _____ <input type="checkbox"/> Other assets, please specify HK\$ _____

Part V Willingness and Expectation of Applicant

1. I and/or my family members agree with the concept of the Project, and are willing to participate in the community activities that are organized by the operator and comply with the agreement made at the time of our residence.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
2. If the unit needs to be shared with other families, I and/or my family members agree to live together with other families.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
3. I and/or my family members agree to participate in the activities organized by the service operator on a regular basis.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
4. I and/or my family members agree to share and clean the shared space of the unit (such as the living room) with others.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
Have you ever applied for any unit under the Community Housing Movement, operated by another service operator?	
<input type="checkbox"/> Yes, and I successfully obtained a unit <input type="checkbox"/> Yes, and I am on the Waiting List	
<input type="checkbox"/> Yes, but I did not obtain any unit <input type="checkbox"/> I have never applied	
Expected date of residence in the Social Housing (e.g. 2020 April): _____ (year) _____ (month)	

Part VI Declaration and Commitment of the Applicant and Family Members who are 18 years old or above

<p>1. Before completing the Application Form, I and/or my family members have understood the application procedures, application information, and evaluation criteria of the Community Housing Movement (the “Project”). I and/or my family members undertake to abide all policies and arrangements in respect of applying for and allocation of housing under the Project from time to time amended and implemented. And the service operators shall have the sole and final discretion in housing allocation;</p> <p>2. As at the date of this application, I and/or my family members do not own or own in the joint names with others or did not enter into any agreement for sale and purchase in purchasing any kind of residential properties situated in Hong Kong, and do not hold more than 50% of the shares in any company, which owns residential properties situated in Hong Kong, directly or through a subsidiary company;</p> <p>3. I and/or my family members understand that the Council may collect personal data of me and/or my family members from relevant government departments, public/private institutions (including but not limited to financial institutions and banks), and/or any third party (including but not limited to employers) that possesses personal data of me and/or my family members in order to make verification and assess the eligibility of the application. In the process of data collection, I and/or my family members agree that the Council may disclose the personal data provided by me and/or my family members to the above-mentioned institutions and/or third party. And I and/or my family members authorize any institutions and/or any third party that possesses personal data of me and/or my family members to provide personal data of me and/or my family members to the Council in order to verify the application;</p> <p>4. I and/or my family members understand and agree that the provision of information in this Application Form is on a voluntary basis. If I and/or my family members do not provide sufficient information, the</p>

service operator may not be able to process the application;

5. I and/or my family members understand and agree that the service operator may disclose, verify and/or transfer all personal data provided in the Application Form and all relevant documents to the relevant departments, institutions or cooperative units participating in the Project when processing, auditing and/or investigating the application. All personal data will be processed in accordance with the policies as amended from time to time by the Council and the *Personal Data (Privacy) Ordinance*;

6. I and/or my family members understand and agree that the Council can use the information provided by me and/or my family members in this Application Form for statistical survey or research;

7. I and/or my family members declare that the information provided in this Application Form and the required documents or data submitted by me and/or my family members are accurate and true. I and/or my family members understand that if we knowingly or deliberately make false statements or conceal data, or in any other way mislead the Council, I and/or my family members may be prosecuted and disqualified from the Project immediately, and may be barred from using the unit allocated to me and/or my family under the Project forthwith. I and/or my family members understand that any wilful misrepresentation or omission of information so as to become qualified for the Project is a criminal offence;

8. I and/or my family members understand that pursuant to *Personal Data (Privacy) Ordinance*, I and/or my family members have the right to request access to and change the information provided in this Application Form. If necessary, please submit the request to the Hong Kong Council of Social Service with the contact address of Room 505, 5/F, Harcourt House, 39 Gloucester Road, Wan Chai, Hong Kong; and

9. I and/or my family members understand and agree to move out of the unit allocated to me and/or my family members under the Project after the expiration of the Project or after being allocated with public rental housing.

I and/or my family members understand and agree to the terms and conditions set out in clauses 1 to 9 of Part VI. *

Part VII Transfer the Personal Data

I and/or my family members agree that if the application is not accepted, the information provided by me in this Application Form can be forwarded to other service operators under other social housing projects of the Council and to allow them to contact me in asking whether I am willing to consider applying for units under other transitional community housing.

Fill in the form, please mail / Fax/ Post /Post Office

Address: 1/F, Shanghai Centre, 473-475 Shanghai Street, Mong Kok, Kowloon

Email: jdieas@bokss.org.hk Fax: 2377-3066

Hotline: 2377-3069 / 6591-2374

#Referral Data

Name Of Agency : _____ Signature : _____

Tel : _____ Name : _____

Upon receipt of your application, if your application meets the eligibility criteria, the project service operator of the Community Housing Movement or other social housing projects of the Hong Kong Council of Social Service will contact the applicant to submit supporting documents, including:

1. Identity documents of the applicant and/or other family members;
2. Application number of public rental housing and application documents for public rental housing;
3. Relevant supporting documents of bank deposits, income, assets, and government subsidies; and
4. Other supporting documents related to the application.

If you have any inquiries, please contact the project at 2377-3069 / 6591-2374.

*Must fill in