HONG KONG BAPTIST UNIVERSITY

Human Resources Office

	Home Financing Scheme Initial Application for Home Financing Allowance				
No	tes				
1. 2.	Applicants should read the "Rules on the Home Financing Scheme" carefully before completing this form. Please ensure that Parts I to IV are completed in full and that required documents including the "Statement in Respect of Housing Benefits" are attached. The information provided will be used by the Human Resources Office for determining the applicant's eligibility for the Home Financing Scheme.				
I.	Particulars of Applicant				
	1.	Name: *Prof./Dr./Mrs./Ms./Miss			
	2.	Staff ID Card No.: 3. Post:			
	4.	Department/Office: 5. Contact Phone No.:			
	6.	Marital Status: Single Married Separated Divorced Widowed			
	7.	Previous employment with the Hong Kong Government and/or publicly-funded organizations:			
		Yes (please provide details on department or name of organization, post and period of employment to be attached to the "Statement in Respect of Housing Benefits" form.)			
п.	 Particulars of Spouse / Ex-spouse(s) (Must be completed by all applicants except those of single marital status. Please use separate sheet to supply particulars if the spaces below are insufficient) Spouse 				
	2 F	Name: *Prof./Dr./Mr./Mrs./Miss			
	2.	Hong Kong ID Card No.: 3. Occupation:			
		Name and Address of Current Employer:			
	5.	Previous employment with the Hong Kong Government and/or publicly-funded organizations, if any:			
		Yes (please provide details on department or name of organization, post and period of employment to be attached to the "Statement in Respect of Housing Benefits" form.)			
		-spouse(s) [only if the ex-spouse(s) has / have ever been employed in the Hong Kong Government and/or other plicly-funded organization when married with the applicant].			
	1.	Name: *Prof./Dr./Mrs./Ms./Miss			
	2.	Hong Kong ID Card No.:			
	3.	Previous employment with the Hong Kong Government and/or publicly-funded organizations, if any:			
		□ No			
		Yes (please provide details on department or name of organization, post and period of employment to be attached to the "Statement in Respect of Housing Benefits" form.)			
* D	elete a	as appropriate Tick as appropriate 1			

HRO/HSG/F15A

Particulars of Current Accommodation Address:					
_					
1	Туре	of accommodation / housing benefits (<i>Please tick as appropriate</i>):			
		Staff Quarters provided by the * University / other publicly-funded organizations			
	□ P	Privately rented accommodation - subsidized by the University in the form of Private Tenancy Allowance			
l	□ F	Home * Purchase / Financing Scheme (please specify no. of installments drawn below) @			
l	□ P	Private unsubsidized accommodation			
I		Housing benefits provided by the spouse's employer			
I	□ P	Public rental housing units			
l	🗆 F	Flat under the * Civil Servants Co-operative Building Society / Government Built Housing Schemes			
I		Home Ownership Scheme / Sandwich Class Housing Scheme			
l		Sandwich Class Housing Loan Scheme			
I	*	⁶ Mortgage / Home Loan Interest Subsidy Scheme of * Education Department / Hospital Authority (<i>please specify of installments drawn below</i>) [@]			
I	*	⁴ Home Purchase Loan Scheme / Home Starter Loan Scheme granted by * Hong Kong Housing Society / Housing S			
I	Others (please specify details)	Others (please specify details)			
	@ P	Period of entitlement for housing benefits drawn above:			
]	My spouse's current accommodation:				
I	🗌 is	s the same as mine			
I	🗌 is	s different from mine. Details:			
	_				
Declaration and Undertaking					
	1. I (i	 declare that i) I have read the "Rules on the Home Financing Scheme" and the "Rules on Prevention of Double Hour Benefits" and will accept and observe the terms and conditions contained therein. 			
	(i	ii) the information given by me in the "Statement in Respect of Housing Benefits" relating to my/and spouse's/ex-spouse's claim histories for housing benefits is correct.			
	2. I (i	understand that i) if my application is approved, I shall submit a formal application (HRO/HSG/F15B) within 12 months from date of approval-in-principle;			
	(i	ii) if I give false or incorrect information in this application or withhold any material information, I shall be liable refund all or part of the benefits received, and/or to disqualification from all forms of housing benefits prove by the University, and/or to disciplinary proceedings/legal action; and			
	(i	iii) the personal data provided in this application can be used by the University in activities relating to administration of housing benefits and housing related benefits and may be disclosed to other connected bo for such purpose;			
		undertake to notify the Human Resources Office <u>within 14 days</u> should there be any change in the foregative articulars that may affect my eligibility for the University housing and housing-related benefits.			
		Signature of Applicant Date			

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Human Resources Office

Home Financing Scheme Initial Application for Home Financing Allowance Notification to Staff (to be completed by Human Resources Office) V. To: _____ Department/Office: 1. Based on the information given in Parts I to IV and in the "Statement in Respect of Housing Benefits" and the records in the Human Resources Office, this is to certify that you * are/are not eligible to join the Home Financing Scheme. Approval-in-principle is given for your Initial Application for Home Financing Allowance. Please note that you are 2. required to submit to the Human Resources Office a Formal Application together with the required documents within 12 months, i.e. on or before ______. If a Formal Application is not received within the 12-month time limit, the approval-in-principle shall lapse automatically. If you subsequently wish to join the Scheme, you have to submit a fresh Initial Application. 3. Please also note that in the event of any change of your personal particulars, such as marital status, which may affect your eligibility for the University's housing benefits, you need to inform the Human Resources Office as soon as possible so that a revised notification can be issued where necessary. Signature: Date: for Director of Human Resources * Delete as appropriate

PM:pn HSG/F15A March 2001

HRO/HSG/F15A