

MIDWIVES COUNCIL OF HONG KONG
APPLICATION FOR TRAINING IN MIDWIFERY

(A) Personal Particulars of Applicant

1. Full name (as shown on the Hong Kong Identity Card/Passport):

(a) in English _____ (b) in Chinese _____

2. Hong Kong Identity Card / Passport No.: _____

3. Name of Training School: _____

4. Correspondence Address in Hong Kong: _____

5. My name *is / is not on the Register of the Nursing Council of Hong Kong.

My registration number is _____ (*Copy of the registration certificate should be attached*).

6. I declare that I have attained such educational qualifications as the Midwives Council of Hong Kong has specified.

7. I hereby attach "References as to Character" in support of my application for training in midwifery.

Signature of Applicant

Date: _____
(DD/MM/YYYY)

(B) Suitability to undergo Midwifery Training (*to be completed by the person-in-charge of the training school*)

We hereby certify that _____ has been found suitable to commence midwifery training on _____ (DD/MM/YYYY).

Signature of person-in-charge of the training school

Name and position of person-in-charge

Name of training school

Date: _____
(DD/MM/YYYY)

REFERENCES AS TO CHARACTER

**(To be completed by a person, not being a relative of the applicant,
who has known the applicant for at least 12 months)**

I hereby state that I am *not* a relative of _____ . I
certify that I have known him/her* personally for _____ year(s), and that
he/she* is of good moral character.

Remarks (if any):

Signature: _____

(name in block letters)

Hong Kong Identity Card No./Passport No. ^{Note:} _____

Address: _____

Occupation: _____

Date: _____

** Please delete where inappropriate.*

Note: The Hong Kong Identity Card / Passport number must be provided in full, otherwise, the "References as to Character" will be regarded as invalid.

PERSONAL DATA COLLECTION STATEMENT

Purpose of Collection

The personal data you provided to the Midwives Council of Hong Kong are for the purpose of the application you are currently making only. The provision of personal data is obligatory. If you do not provide the requested information, the Midwives Council of Hong Kong may turn down your application.

Classes of Transferees

2. The personal data you provided are mainly for use within the Midwives Council of Hong Kong but they may also be disclosed to other Government bureaux, departments, agencies or authorities for the purpose mentioned above, if necessary. Moreover, according to the Midwives Registration Ordinance (Cap. 162, Laws of Hong Kong), your name, date of registration, registered number and particulars of training and qualifications will be entered into the Register of Midwives for public inspection. Some or all of these data may also be published in the Gazette. Other than that, such data will only be disclosed to other parties where you have given consent to such disclosure or where such disclosure is allowed under the Personal Data (Privacy) Ordinance (Cap 486, Laws of Hong Kong). Please notify the Midwives Council of Hong Kong whenever there is any change of your personal data.

Access to Personal Data

3. You have a right of access and correction with respect to personal data as provided for in sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data provided by you during the occasion as mentioned in paragraph 1 above. A fee may be imposed for obtaining a copy of the data.

Enquiries

4. Enquiries concerning the personal data provided, including access and the making of corrections, should be addressed to:-

The Secretary, Midwives Council of Hong Kong
1/F, Shun Feng International Centre
182 Queen's Road East
Wan Chai, Hong Kong
Tel. : 2527 8351
Fax : 2527 2277