# Sabbatical Leave Scheme for Professional Development of Teachers and Principals Application Form

1. Please read the Education Bureau (EDB) Circular Memorandum (CM) No. 32/2019 and the Information Notes to Applicants at **Appendix I** carefully before completing this form.

#### 2. Submission Procedure:

Remarks	Submission Method and Deadline	
Applicants should seek prior consent from their school principals/supervisors regarding their proposals for sabbatical leave periods and educational research /school development project(s), and submit Part I in fillable pdf form.	Applicants are required to send Part I (pdf format) and Part II (scanned pdf format) by email to aaslpd1@edb.gov.hk and copy to school principal/ supervisor by 6:00 p.m. on 3 May 2019.	
Applicants should print a hard copy for their school principals/supervisors to fill in this part and scan the hard copy in pdf format.	Please mark "Application for Sabbatical Leave Scheme for Professional Development of Teachers and Principals—(Name of Applicant)" as the email subject.	
	consent from their school principals/supervisors regarding their proposals for sabbatical leave periods and educational research /school development project(s), and submit Part I in fillable pdf form.  Applicants should print a hard copy for their school principals/supervisors to fill in this part and scan the hard copy	

- 3. An acknowledgement email will be sent to the email address provided upon receipt of each application.
- 4. Each applicant shall submit <u>ONE</u> application only.
- 5. Please provide all relevant information in the application form as required. If there is missing information, the application may not be processed. Information provided will be used for processing the application under the Scheme administered by EDB. It may be transferred to relevant section(s) of EDB and participating institution(s) for matters related to the Scheme. You are required to notify the School Leadership and Professional Development (SLPD) Section if there are any subsequent changes to the information provided e.g. the school you are serving, after submission of the application form<sup>6</sup>.

<sup>&</sup>lt;sup>6</sup> You have the right to request access to or correction of personal data provided in this form in accordance with the provisions of the Personal Data (Privacy) Ordinance. For enquiries, please contact Ms Clara Wong at Tel: 3509 7581.

- 6. Results of all applications will be sent to applicants and school principals /supervisors via email. Successful applicants will be required to confirm their acceptance of the offer by signing and returning a confirmation before the specified deadline.
- 7. Enquiries about the Scheme can be directed to Ms Clara Wong (Tel: 3509 7581) or Ms Fion Lam (Tel: 3509 7580) of the School Leadership and Professional Development Section, Education Bureau.

# 教師及校長帶薪進修計劃

#### **Sabbatical Leave Scheme for**

# Professional Development of Teachers and Principals

甲部 申請表 Part I Application Form

# 甲部(由一位申請人填寫) Part I (to be completed by ONE applicant)

#### Section A 個人資料 Personal Particulars

姓名	英文(English)	姓 (Surname)	名(Other Names)	)
Name	中文(Chinese)	)		
香港永久居民 Permanent Resident of Hon	g Kong	□ Yes 是 □ No ?	否	
通訊地址 Correspondence Address				
日間聯絡電話 Daytime Contact No.			手提電話 Mobile Phone No	).
電郵地址 Email Address	(遴選結果將以電郵方式通知申請人,請確保電郵地址正確。) (Please ensure your email address is correct, as applicants will be notified of the results via email.)			
Section B 學校資料 Scho	ool Information			
學校英文名稱 School Name in English				
學校中文名稱 School Name in Chinese				
學校資助類別 Finance Type of School*	□ 官立學校 Government □ 資助(非特殊學校) Aided (Non-Special School) □ 資助(特殊學校) Aided (Special School) □ 按位津貼學校 Caput □ 直接資助計劃學校 Direct Subsidy Scheme □ 參與幼稚園教育計劃的幼稚園 Kindergartens joining the KG Education Scheme			
學校聯絡電話 School Telephone No.		學校傳 School	真號碼 Fax No.	
校長姓名 Name of Principal		校長聯 Princip Telepho	al's Contact	

<sup>\*</sup> Please insert a "\sqrt{"}" in the appropriate box

#### Section C 學歷及認可教師資格 Academic Qualification and Recognised Teacher Qualification

請按日期順序列出獲取與教育專業有關的學歷詳情。Please provide details of your post-secondary academic qualification attained that is relevant to the teaching profession in chronological order.

Name of the Institution 學院名稱	Qualification Obtained or To be Obtained 已獲取 / 將獲取的學歷	Majors and Minors 主修及副修	Date 日期	
			From 由 (MM/YY)	To 至 (MM/YY)

#### Section D 相關教學及工作經驗 Relevant Teaching and Work Experience

請按任職日期順序列出相關教學及工作經驗。Please provide relevant teaching and work experience in chronological order.

	'			
	School Name	相關教學及工作經驗,例如: Relevant teaching and work experience, for example: • Served as a member/head of a (KLA/subject)	Date 日期	
	School Name 學校名稱/ Organisation 機構  Conducted an action research on (topic) 進行(主題)行 動研究  Served as a member of (EDB/Government Committee) on (KLA/subject/domain) 擔任(教育局/政府)委員會 成員	From 由 (MM/YY) 月/年	To 至 (MM/YY) 月/年	
(i)	全職教學經驗			
	Full-time teacher ex	xperience		
(ii)	社會服務經驗			
	Experience in com	munity services		

### Section E 過往帶薪進修假期的經驗 (如有) Prior Experience of Paid Study Leave (if any)

請提供最近五年(按日期順序列出)成功申請一個月或以上帶薪進修假期的經驗。Please provide experience of successful application of paid study leave of/exceeding one month in the past five years (in chronological order).

Paid Study Leave 帶薪進修假期 (e.g. i-journey) (如在職中學教師 帶薪境外進修計劃)	Focus of Study 學習焦點	Date 日期	
		From 由 (MM/YY)	To 至 (MM/YY)

#### Section F 帶薪進修計劃建議 Proposal on Sabbatical Leave

請簡介帶薪進修計劃的初步構思。Please describe briefly initial plan of sabbatical leave and educational research/school development project.

	iopinent projec				
(i)	擬申請帶薪進修期時段(由一個月至五個月)Sabbatical leave period applied for				
	(from one month to five months)				
	From <u></u>	(dd/m	m/yyyy) to 至	(dd/mm/yyyy)	
	(	month(s)月	day(s)∃)		
(ii)	帶薪進修計	計劃的學習目標及內容	Learning objectives and	l contents of sabbatical leave	
(iii)	教育研究/鳥	學校發展計劃名稱及目	標 Title and objectives	of educational research/ school development	project
	如何配合(ii)	的學習目標及內容 Re	elevance to (ii) learning	objectives and contents of sabbatical leave	

# (iv) 行動方案 Action plan

(包括專業發展進修課程/活動類型及日程、推行計劃日程、預期所需的學校支援等)

(including types and schedules of CPD programmes/activities, work schedule of educational research/ school development project, expected support from school, etc.)

活動/課程/工作 Activities/Programmes/Tasks	所需學校的配合(如有) Expected support from school (if any)
<ul> <li>e.g.</li> <li>to attend a 4-week course at (institution)</li> <li>to organise a training workshop/seminar to share overseas experience with colleagues</li> <li>to review the subject curriculum/ assessment policy</li> <li>to plan/conduct data collection/ survey/ discussion/ interview/ observation</li> </ul>	e.g. one representative from each subject panel to join 2 weekly meetings
	<ul> <li>Activities/Programmes/Tasks</li> <li>e.g.</li> <li>to attend a 4-week course at (institution)</li> <li>to organise a training workshop/seminar to share overseas experience with colleagues</li> <li>to review the subject curriculum/ assessment policy</li> </ul>

(v)	預期成果,以及對個人/學生/學校/教育社群的效益 Expected outcomes and benefits to self/students/school/education
	community
(vi)	評估成效的方法 Approach to evaluate the effectiveness
,	
(VIII)	支持申請的補充資料 (如獲得目標學者、學院、機構、學校教職員初步支持或與他們維繫協作關係等)
	Additional information supporting your application (e.g. initial support from or collaborative partnership with target academics, institutions, organisations, teaching staff of schools, etc.)
	academics, institutions, organisations, teaching starr of schools, etc.)

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#### Declaration by the Applicant 申請人聲明

本人聲明,就本人所知及確信,在此申請表內所填報的所有資料均屬完備和真實。本人明白倘若故意虛報資料及/或提供抄襲資料或隱瞞重要事實或沒有就申請書內已更改的資料通知教育局,本人的申請資格可能被取消或將不能繼續參與「計劃」,而本人亦可能要退還相關款項。本人明白,如教育局要求,本人須提交相關證明文件,否則本人的申請將不獲處理。

I declare that all the information provided in the application form is, to my best knowledge, complete and accurate. If I willfully give any false and/or plagiarised information or withhold any material information in this form, or fail to notify the office concerned of any subsequent change of the information provided, it will render me liable to disqualification for selection or discontinuation of participation in the Scheme, and I may be required to reimburse monies incurred. I understand that my application should be supported by relevant documents/evidence upon request from the EDB. If I fail to do so, my application may not be processed.

本人明白本申請表格上所提供的個人資料為遴選程序中確立本人的申請資格之必須資料。本人同意教育局為辦理本人的申請及核實提交的資料而進行任何所需的查詢。如本人獲選參加「計劃」,代表本人明白及接納以下條款和細則:

I understand that the personal information solicited in this form is necessary to establish my eligibility and qualifications for the selection process. I consent to the EDB making any necessary enquiries as required in matters relating to the Scheme and for the verification of the information given in my application. I understand and accept that if my application is successful:

- (a) 教育局可應要求向有關的院校及機構披露本人所提供的資料包括而不限於姓名、聯繫方法、專業背景和初步計劃書,以便進行溝通和協助推行「計劃」;以及
  - the information furnished, including but not limited to my name, contact details, professional background and initial proposal, may be disclosed upon request to the collaborating institutions and other support organisations for communication and programme engagement purposes; and
- (b) 教育局將獲授權於各公共渠道(例如但不限於刊物、網站和社交平台等)公開含有本人姓名及專業背景的資料和於「計劃」內所使用及產生的所有資料,以作推廣、紀錄、報告及為專業學習社群建立匯編/資源數據庫之用。

the EDB is authorised to publicise information that contains my name, professional background, and all other materials used during and produced after the Scheme for promotion, recording and reporting, and creating a compendium/resource database for the Professional Learning Communities (PLCs) via public channels including but not limited to publications, websites, and other social media platforms.

	Hong Kong Identity Card
Name of Applicant:	Number:
申請人姓名	申請人身份證號碼
請按以下空格以進行電子簽署。	
Please click the box below to process digital si	gnature.
注意:電子簽署完成後,你將 <u>無法</u> 編輯本申詢	<i>青表格之甲部内容。</i>
Note: Content of Part I of this application form	cannot be edited after it is digitally signed.