

個人資料 PERSONAL DATA

香港警務處鑑證科
Hong Kong Police Force Identification Bureau
性罪行定罪紀錄查核申請表
Application Form
For Sexual Conviction Record Check



(本欄由辦理機關處理 For Official Use Only)

SCRC

- i. 請用黑色或藍色筆以正楷填寫本申請表
Please complete this form in Block letters using black or blue pen.
ii 請在適當空格內填上別號「✓」 Please tick as appropriate (✓)

**請先登入網上預約系統 (<https://www.obs.police.gov.hk>) 或致電自動電話查詢系統 (電話: 3660 7499) 辦理預約。
Advance booking through Online Booking System (<https://www.obs.police.gov.hk>) or Auto-Telephone Answering System at 3660 7499 is required.**

1. 申請類別 Type of Application and Applicant's Information

- 新申請 New Application (準僱員 Prospective Employee) 續延查核結果有效期 Renewal of Validity Period
 新申請 New Application (合約續期僱員 Contract Renewal Staff)

2. 個人資料 (以身份證明文件所載者為準) Personal Particulars (As stated on Identity Document)

姓名 (中文) Name in Chinese	姓名 (英文) Name in English	
中文商用電碼 (如有) Chinese Commercial Code (if any)	出生日期 Date of birth 年 yyyy 月 mm 日 dd	
性別 Sex <input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female	身份證明文件號碼 Identity Document no. ()	簽發地點 (如適用) Place of issue (if applicable)
聯絡電話號碼 Contact Telephone no.	香港通訊地址 Correspondence Address in HK	

3. 到期提示訊息 Reminder before expiry of the validity period

選擇在有效期前三個月接收提示訊息 Opt to receive reminder 3 months before expiry of the validity period	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No	提示訊息語言 Reminder of language	<input type="checkbox"/> 中文 Chinese <input type="checkbox"/> 英文 English
電郵 Email / 電話號碼 SMS Mobile No.			

4. 申請人聲明書 Declaration of Applicant

本人，即下開簽署人，現謹此聲明：
I, the undersigned declare that:

(1) 本人已詳閱『申請人須知』內所述內容，並明白有關性罪行定罪紀錄查核服務的條款及條件，包括有關結果只供申請從事與兒童或精神上無行為能力人士有關工作之用。
I have familiarized myself with the "Notes to Applicants" and understood the terms and conditions for the Sexual Conviction Record Check service, including that the check result is only intended for seeking employment related to children / mentally incapacitated persons.

(2) 就本人所知及相信，此申請表內所報的資料均屬正確無誤。
The information given in this application is correct to the best of my knowledge and belief.

申請人簽署
Signature of Applicant _____ 日期
Date _____

5. 未滿十八歲申請人的父、母或合法監護人同意書 Consent from Parent or Legal Guardian of Applicant under 18 Years of Age

注意：未滿 18 歲的申請人，必須由父、母或監護人陪同遞交申請。

Note: Applicants under the age of 18 should always be accompanied by their parent or guardian when submitting their applications

本人，即下開簽署人，謹此聲明本人乃申請人的： I, the undersigned, declare that my relationship with the applicant is	<input type="checkbox"/> 父母 Parent	<input type="checkbox"/> 獲授權的監護人 Legal Guardian (by Authorisation) <input type="checkbox"/> 法庭頒令監護人 Legal Guardian (by Court Order)
家長 / 監護人姓名 Name of Parent / Guardian	家長 / 監護人 身份證明文件號碼 Identity Document No. of Parent / Guardian	
家長 / 監護人 簽署 Signature of Parent / Guardian	日期 Date	

本欄由辦理機關處理 For Official Use Only	職員姓名、職位及簽署 Name, Post Title and Signature of Officer	日期 Date
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