機 密 CONFIDENTIAL

香港社會服務聯會 The Hong Kong Council of Social Service

Telephone No: (852) 2864 2929
Facsimile No: (852) 2865 4916
E-mail: council@hkcss.org.hk

Website: http://www.hkcss.org.hk

機構會員申請 Application for Agency Membership

機構會員 : 凡宗旨與目標與社聯之宗旨與目標一致、熱心社會服務,又或眞正提供直接社會服務,滿足

現時社區需求爲其主要工作之社會服務機構。

Agency Members : Social service organizations whose aims and objects are in harmony with those of the Council and who have

an active interest in the social service field or those who provide as their primary function a bona fide direct

social service which helps to meet the existing needs of the community.

申請須知 Application Notes

根據社聯章程第十三條,凡欲申請爲機構會員的機構,須符合以下資格:

- 一. 須經本會承認其爲非牟利團體;
- 二. 開辦至少一年;
- 三. 須有公司章程或類似的公司文件;
- 四. 須印備年報及核數報告或經證明爲正確的周年收支帳目;
- 五. 必須遵守本會執行委員會隨時修訂的其他條件;

According to Clause 13 of the Council's Constitution, organizations wishing to apply for Agency Membership must fulfill the following criteria in order to be eligible:

- 1. They must be recognized by the Council as being a non-profit-making body;
- 2. They must have been in operation for a period of at least one year;
- 3. They must possess a Constitution or similar document of incorporation;
- 4. They must publish their annual report and audited accounts or certified accounts with regards to annual income and expenditure;
- 5. They must comply with such other conditions as may be prescribed by the Executive Committee from time to time;

申請程序 Application Procedures

- 一. 填妥申請表格及邀請其他機構會員之正式代表爲動議及和議人;
- 二. 將申請表格及有關文件寄回香港灣仔軒尼詩道 15 號溫莎公爵社會服務大廈 13 樓香港社會服務聯會(業界發展-會員聯繫及服務);
- 三. 社聯業務總監(業界發展)將進行機構探訪,並將有關申請提交社聯執行委員會通過,並於三十日內以書面通知有關結果。
- 1. Complete the Application Form and invite the official representatives of other Agency Members for the nomination of Membership Application;
- Send the Application Form with the required application documents to Sector and Capacity Development Membership Liaison & Service, The Hong Kong Council of Social Service, 13/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong;
- 3. Business Director (Sector and Capacity Development) of the Council will visit the agency and the application will be submitted to the Executive Committee (ExCo) of the Council for consideration. Applicants will be notified in writing within 30 days after ExCo's endorsement.

THE HONG KONG COUNCIL OF SOCIAL SERVICE Membership Application Form

以下一切資料將絕對保密,並只用作辦理成為社聯會員申請事宜。

The information provided is for application purposes only and it will be treated in STRICTEST CONFIDENCE.

1.	機構名稱 Name of Organization					
	(中文 in Chinese):					
	(英文 in English):					
2.	機構地址 Address of Organization					
	(中文 in Chinese):					
	(英文 in English):		_			
	雪 子 张 碼 Tal No ·		_			
	電郵地址 E-mail Address:	 機構網址 Agency Website	:			
3.	機構的宗旨與目標 Aims and objectives of the C	Organization				
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4.	代表申請會籍之機構聯絡人 Contact Person fo					
	姓名 Name:(中文 in Chinese)	英文 in English):				
	職位 Post: (中文 in Chinese)		-			
	電話號碼 Tel No.:					
	電郵地址 E-mail Address:					
5.	機構主管姓名及職銜 Name and Title of the Agency Head of Organization					
	姓名 Name:(中文 in Chinese)	(英文 in English):				
	職位 Post:(中文 in Chinese)	 (英文 in English):				
	電話號碼 Tel No.:	 傳真號碼 Fax No:				
	電郵地址 E-mail Address:					
c	应电水区 Funding Course					
6.	經費來源 Funding Source		(用☑表示 please☑)	/ ₋ .0	D/ \	
	社會福利署資助 SWD Subvention		(用凹汞水 piease凹)	(~9	/o) }	
	香港公益金 The Community Chest of Hong Kong	1		()	
	香港賽馬會慈善信託基金 The Hong Kong Jockey Club Charities Trust		П	()	
	獎券基金 Lotteries Fund	, Jun J. B.	П	()	
	企業/個人捐款 Corporate /Individual Donation		П	()	
	其他來源 Other Sources			()	

服 務	服務概況	服務對象及目前接受服務人數
Service	Service Description	Target population & no. of clients served

8. 機構受薪員工人數及職位 (如有需要請用另紙書寫)

請簡單介紹申請機構在香港提供的服務 (如有需要請用另紙書寫)

Number of paid staff and their positions in organization (Please attach additional sheets if necessary)

職位 Position	受薪員工人數 Number of paid staff

9. 申請成為社聯機構會員的	1原 亾	J
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Reasons for Application for	Council's Agency Membership
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請提交以下有關申請文件之副本

- 機構登記或轄免登記証明書之副本
- 非牟利組織的証明文件
- 機構之會章或公司章程
- 最新出版年報
- 最新出版每年收支核數報告或會計報告
- 機構組織圖
- 執行委員會/董事會名單

Please submit copy of the following supporting documents

- Copy of certificates of Organization's registration / exemption of registration
- Document to certify as non-profit making
- Constitution or Articles of Association
- Latest Annual Report
- Latest Audited Accounts or certified accounts
- Organization Chart
- Names of Members of Executive Committee / Board

No	mination (Please refer to item 1 of the Application Procedures)		
l.	提名人 Proposer			
	本人乃 (機構名稱)			
	的機構代表,謹此提議接納申請者為社聯機構會			
	Proposed by the undersigned, the official representative of			
	(Agency Name) that the applicant be granted Agency Membership of the Council.			
		簽署 Signature		
	機構蓋印 Agency Chop	姓名(請用正楷) Name in block letters		
II.	和議人 Seconder			
	本人乃 (機構名稱)			
	的機構代表,謹此和議接納申請者為社聯機構會員。			
	Seconded by the undersigned, the official representative of			
	(Agency Name) that the applicant be granted Agency Membership of the Council.			
		 簽署 Signature		
		双 名 Oignaturo		
	 機構蓋印 Agency Chop	性名(請用正楷) Name in block letters		
	機構盖中 Agency Chop	姓名(領用正偕) Name III DIOCK letters		
•17	Declaration			
明,		进 <u>众吕,</u> 进小厅在墙内江畈上众吕内印		
	已閱讀香港社會服務聯會章程,如接納成為社聯機			
		council of Social Service and hereby agree to comply with the		
tipula	ations thereof should Agency Membership of the Council be g	ranted.		
		th W. O.		
		簽署 Signature		
	機構蓋印 Agency Chop	姓名(請用正楷) Name in block letters		
	日期 Date	職位 Position in Agency		

10. 推薦者 (請參閱申請程序第一項)