

**Particulars of Associate of Employment Agency
(Supplementary Sheet- Employed Individual)**

Information and Declaration of Employed Individual (Other than Related Person)

- (1) I / We hereby undertake and warrant that I / we shall comply with section 57 of the Employment Ordinance which stipulates that an employment agency must not directly or indirectly receive from any person in connection with obtaining employment for him / her, any reward of any kind, or any payment or other advantage in respect of expenses or otherwise, except the prescribed commission. I / We understand that contravention of this section shall be guilty of an offence and shall be liable on conviction to a fine of \$350,000 and to imprisonment for 3 years.
- (2) I / We understand that the Commissioner for Labour may refuse to issue / renew the employment agency licence, or may revoke the licence on grounds of my / our contraventions of Part XII of the Employment Ordinance, the Employment Agency Regulations or the Code of Practice for Employment Agencies.
- (3) I / We consent to the release of my / our records of contraventions of Part XII of the Employment Ordinance, the Employment Agency Regulations or the Code of Practice for Employment Agencies (if applicable) by the Employment Agencies Administration of the Labour Department to the employment agency I / we belong or am / are employed.

To be completed by <u>ALL</u> employed individuals						Signature (applicable for person(s) who has (have) never signed this form for the below EA before)
Name of Employed Individual	HKID No. (Passport No. and Nationality for non-HK Resident)	Position	Date of Joining (dd / mm / yyyy)	If it is a change of position, please indicate by putting a '✓' in the box		
1.				<input type="checkbox"/>		
2.				<input type="checkbox"/>		
3.				<input type="checkbox"/>		
4.				<input type="checkbox"/>		
5.				<input type="checkbox"/>		
6.				<input type="checkbox"/>		
7.				<input type="checkbox"/>		
8.				<input type="checkbox"/>		
9.				<input type="checkbox"/>		
10.				<input type="checkbox"/>		
11.				<input type="checkbox"/>		
12.				<input type="checkbox"/>		

To be completed by ALL employed individuals						Signature (applicable for person(s) who has (have) never signed this form for the below EA before)
Name of Employed Individual	HKID No. (Passport No. and Nationality for non-HK Resident)	Position	Date of Joining (dd / mm / yyyy)	If it is a change of position, please indicate by putting a '✓' in the box		
13.				<input type="checkbox"/>		
14.				<input type="checkbox"/>		
15.				<input type="checkbox"/>		
16.				<input type="checkbox"/>		
17.				<input type="checkbox"/>		
18.				<input type="checkbox"/>		
19.				<input type="checkbox"/>		
20.				<input type="checkbox"/>		
21.				<input type="checkbox"/>		
22.				<input type="checkbox"/>		
23.				<input type="checkbox"/>		
24.				<input type="checkbox"/>		
25.				<input type="checkbox"/>		

Note: All the employed individuals have to confirm that the information provided on the table above is true and correct, and they agree to the above declaration. When EA submits licence application(s), information of all employed individuals has to be provided in the above table. For employed individual who has submitted and signed to agree to the above declaration before, his / her declaration is still valid and there is no need to sign on the above table again. Nevertheless, employed individual who has not signed and submitted this form for the below EA before shall sign on the above table so as to confirm and agree to the above declaration.

Name of Employment Agency: _____

Name of Applicant / Licensee / Director: _____

Signature of Applicant / Licensee / Director: _____

Date: _____

(if the application is made by a limited company, the seal of the company is required.)