

## Hong Kong Qualifications Register (QR) 香港資歷名冊

### Add/ Change of Enrolled User (Sample) 申請/更改登記用戶(填寫示例)

To: QR Administrator 資歷名冊管理員

Fax: 2845 5951

Email: [qadmin@hkcaavq.edu.hk](mailto:qadmin@hkcaavq.edu.hk)

Official Use Only

Checked by: \_\_\_\_\_

Updated by: \_\_\_\_\_

Date of amendment made: \_\_\_\_\_

I would like to add/change the following enrolled user(s)

本人欲申請/更改下述登記用戶

#### Add a new enrolled user 增加登記用戶

(If there are already two enrolled users registered under the operator/Appointed Assessment Agency (AAA), please indicate the user to be replaced by deleting an existing user. 如營辦者/受委評估機構已有兩位登記用戶，請刪除被取代的現有登記用戶。)

		Field Length (Character)
User Name in English 英文全名	: <b>Sheung Chun Sum</b>	40
User Name in Chinese 中文全名	: <b>尚進深</b>	20
User Business Title 職位	: <b>Program Officer</b>	80
Email Address of User 電郵 (Please underline all numerical characters for easy identification. 請將數字加底線以作識別)	: <b>wscs<u>15</u>@abc.edu.hk</b>	60
Phone No. of User 電話	: <b>(852)1234 5678</b>	20
Fax No. of User 傳真號碼	: <b>(852)1234 5677</b>	20
Postal Address of User 郵遞地址	: <b>10/F, ABC Building, Quarry Bay, HK</b> <b>香港鰂魚涌 ABC 大廈十樓</b>	250(English)/ 80(Chinese)

#### Delete an enrolled user 刪除現有登記用戶

		Field Length (Character)
User Name in English 英文全名	:	40
User Name in Chinese 中文全名	:	20
User Business Title 職位	:	80
Email Address of User 電郵 (Please underline all numerical characters for easy identification. 請將數字加底線以作識別)	:	60
Phone No. of User 電話	:	20
Fax No. of User 傳真號碼	:	20
Postal Address of User 郵遞地址	:	250(English)/ 80(Chinese)

**Change the personal particulars of an enrolled user 更改現有登記用戶資料**

(\* Please check the box(es) when appropriate. 祇需在適用的空格上加√)

		Field Length (Character)
User Name in English 英文全名	<b>Ng Sheung Chun</b>	40
User Name in Chinese 中文全名	<b>吳尚進</b>	20
	<u>Original 原有資料</u> <u>Changed to 更改為</u>	
<input checked="" type="checkbox"/> User Business Title 職位	<b>Manger</b>	80
<input type="checkbox"/> Email Address of User 電郵 (Please underline all numerical characters for easy identification. 請將數字加底線以作識別)		60
<input type="checkbox"/> Phone No. of User 電話		20
<input type="checkbox"/> Fax No. of User 傳真號碼		20
<input checked="" type="checkbox"/> Postal Address of User 郵遞地址	<b>23/F, ABC building, Quarry Bay, HK</b> <b>香港鰂魚涌ABC大廈二十三樓</b>	250(English)/ 80(Chinese)
	<b>10/F, ABC building, Quarry Bay, HK</b> <b>香港鰂魚涌ABC大廈十樓</b>	

Full Name of Operator/AAA registered on the Qualifications Register

營辦者/受委評估機構於資歷名冊內登記的名稱 : **ABC Company (USU)**

Submitted by 遞交者名稱

: **John Chan**

(Name of Authorized Head of the Operator/AAA  
營辦者/受委評估機構授權主管)

Business Title 職位

: **Executive Director**

Contact Phone No. 電話

: **1234 9876**

Signature 簽署

: **JohnC**

Operator/AAA's Chop

營辦者/受委評估機構印鑑



Date 日期

: **10 Aug 2007**

Note: If you need further information on completing this form, please contact the HKCAAVQ at 3658 0001.

填表時如有需要，可致電 3658 0001 向香港學術及職業資歷評審局查詢