

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

Change of Operator/Appointed Assessment Agency (AAA) Data Profile (Sample)

更改營辦者/受委評估機構資料 (填寫示例)

To: QR Administrator

Fax: 2845 5951

Email: qradmin@hkcaavq.edu.hk

Official Use Only

Checked by: _____

Updated by: _____

Date of amendment made: _____

I would like to make the following amendment(s)*

本人欲更改下述資料*

	<i>Original 原有資料</i>	<i>Changed to 更改為</i>	<i>Field Length (Character)</i>
<input checked="" type="checkbox"/> Short Name 英文簡稱	ABC (USU)	HKABC (USU)	20
<input checked="" type="checkbox"/> Full Name 英文全名	ABC Learning Centre (USU)	Hong Kong ABC Learning Centre (USU)	130
<input checked="" type="checkbox"/> Full Name in Chinese 中文全名	ABC 教育中心(再提升)	香港 ABC 教育中心(再提升)	65
<input type="checkbox"/> Language Control Flag 語言 (E/C/B/I)			1
<input type="checkbox"/> Traditional Chinese 繁體中文 (Y/N)			1
<input type="checkbox"/> Validity Start Date 有效期開始日 (yyyymmdd)			10
<input type="checkbox"/> Validity End Date 有效期終止日 (yyyymmdd)			10
<input type="checkbox"/> Country/Region of Operator/AAA 營辦者/受委評估機構所屬國家/地區			3
<input checked="" type="checkbox"/> Enquiry Phone No. 查詢電話	(852) 1234 5678	(852) 1233 4455	40
<input checked="" type="checkbox"/> Enquiry Fax No. 查詢傳真號碼	(852) 1234 5677	(852) 1234 5679	20
<input checked="" type="checkbox"/> Enquiry Email 查詢電郵 (Please underline all numerical characters for easy identification. 請將數字加底線以作識別)	<u>enquiry@abc.edu.hk</u>	<u>enquiry@hkabc.edu.hk</u>	60

	<u>Original 原有資料</u>	<u>Changed to 更改為</u>	<u>Field Length (Character)</u>
<input type="checkbox"/> Postal Address in English and Chinese 中英文郵遞地址			250(English) 80(Chinese)
<input type="checkbox"/> Billing Address 帳戶地址 (Please include name and title of contact, name of organization and mailing address. 請填寫聯絡人之姓名、職位、機構名稱及郵遞地址。)			400(English) 128(Chinese)
<input type="checkbox"/> Billing Email 帳戶電郵 (Please underline all numerical characters for easy identification. 請將數字加底線以作識別)			60
<input type="checkbox"/> Website 網址			40
<input checked="" type="checkbox"/> Primary Contact 基本聯絡人英文全名	John Chan	Sheung Chun Sum	40
<input checked="" type="checkbox"/> Primary Contact in Chinese 基本聯絡人中文全名	陳進升	尚進深	10
<input checked="" type="checkbox"/> Title of Primary Contact 基本聯絡人英文職位	Executive Director	Program Officer	80
<input checked="" type="checkbox"/> Title of Primary Contact in Chinese 基本聯絡人中文職位	行政總監	課程主任	40
<input checked="" type="checkbox"/> Primary Contact Phone No. 基本聯絡人電話	1234 9876	1234 5678	20
<input type="checkbox"/> Primary Contact Fax No. 基本聯絡人傳真號碼			20
<input checked="" type="checkbox"/> Primary Contact Email 基本聯絡人電郵 (Please underline all numerical characters for easy identification. 請將數字加底線以作識別)	jc<u>17</u>@abc.edu.hk	wscs<u>15</u>@hkabc.edu.hk	60
<input type="checkbox"/> Secondary Contact 第二聯絡人英文全名			40
<input type="checkbox"/> Secondary Contact in Chinese 第二聯絡人中文全名			10

	<u>Original 原有資料</u>	<u>Changed to 更改為</u>	<u>Field Length (Character)</u>
<input type="checkbox"/> Title of Secondary Contact 第二聯絡人英文職位			80
<input type="checkbox"/> Title of Secondary Contact in Chinese 第二聯絡人中文職位			40
<input type="checkbox"/> Secondary Contact Phone No. 第二聯絡人電話			20
<input type="checkbox"/> Secondary Contact Fax No. 第二聯絡人傳真號碼			20
<input checked="" type="checkbox"/> Secondary Contact Email 第二聯絡人電郵 (Please underline all numerical characters for easy identification. 請將數字加底線以作識別)	peter<u>12</u>@abc.edu.hk	peter<u>12</u>@hkabc.edu.hk	60

*Please check the box(es) when appropriate.

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 Nov 2009**

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。