展亮技能發展中心課程 / 職業評估服務申請表格

Application Form for Admission to Shine Skills Centre Programme / **Vocational Assessment Service**



注意: 本申請表格必須以正楷填寫,填寫前,請先閱讀第五頁之「課程申請人及其父母/監護人/至親須知」。 Note:

This application form must be completed in BLOCK letters. Before completing this form, please read the "Notice

to the Applicant and Parent / Guardian / Next of Kin" on P.5.

Member of VTC Group VTC 機構成員

第一部份: 申請類別		由本中心填寫	Source Group:	Application No.:
SECTION 1: TYPE OF APPLIC	_	FOR OFFICIAL USE		
申請入讀課程		申請職業評估服務		
Application for Programme	,	Application for Vocation	al Assessmen	t Service
第二部份: 申請人資料				
SECTION 2: PERSONAL PAR	TICULARS OF APP	PLICANT		
			. #	請人近照 (三十八毫米 x 五十毫米) licant's recent photo (38mm x 50mm)
英文姓名			Арр	licant's recent photo (38mm x 50mm)
Name in English:				
姓 Surname	. 名	First / Other Names		申請人近照
	出生日期	日 Day 月 Month 年	Year (Ξ	三十八毫米 x 五十毫米)
中文姓名	Date of Birth:	1 1		
Name in Chinese:	——————————————————————————————————————			Applicant's recent photo
香港身份證號碼	性別			38mm x 50mm
HKID Card No.:	Sex:	□ 男 Male □ 女 F	emale	
住址				
Residential Address:				
手提電話號碼	,			
Mobile Phone No.:		Residential Tel. No.:		
(可接收香港短訊及 WhatsApp 訊息 Able to re	eceive Hong Kong SMS & Wha	atsApp messages)		
選擇接收短訊通知的語言: Language	for receiving SMS:	=====================================		
□中文 Chinese / □ 英文 English		電郵地址 E-mail Address:		
	•	E maii / taarooo.		
第三部份: 特殊教育需要 / 發	養疾類別 (必須提供證明	月文件)		
SECTION 3: SPECIAL EDUCA	ATIONAL NEEDS / [DISABILITIES (Suppor	ting document s	should be provided)
<i>請於適當空格上,填上剔號「✔」。</i>				
lease tick [✔] in the appropriate box.				
, , ,		1		Г
	由本中心填寫	持有證明文	<u></u>	由本中心填寫
持有證明文件 With Supporting Document	For Official Use	持有證明文 With Supporting [For Official Use
持有證明文件 With Supporting Document		With Supporting I		
持有證明文件 With Supporting Document 自閉症 (A)	For Official Use	With Supporting I		For Official Use
持有證明文件 With Supporting Document 自閉症 (A) Autism	For Official Use	With Supporting I		For Official Use
持有證明文件 With Supporting Document 自閉症 (A) Autism 注意力不足 / 過度活躍症 (T)	For Official Use	With Supporting I		For Official Use
持有證明文件 With Supporting Document 自閉症 (A) Autism 注意力不足 / 過度活躍症 (T) Attention deficit / Hyperactivity	For Official Use	With Supporting I	Oocument	For Official Use
持有證明文件 With Supporting Document 自閉症 (A) Autism 注意力不足 / 過度活躍症 (T) Attention deficit / Hyperactivity disorder	For Official Use	With Supporting I Disconting I Disconting I Disconting Disconting I Disconting Disconting I Dis	Oocument	For Official Use
持有證明文件 With Supporting Document 自閉症 (A) Autism 注意力不足 / 過度活躍症 (T) Attention deficit / Hyperactivity	For Official Use	With Supporting I Discrete Responsible Responsible	Document ficulties	For Official Use

Visceral disability / Chronic illness

視障 (B)

Visual impairment

Intellectual disability

精神病 (M)

Mental illness

SECTION 4: HIGHEST ACADEMIC QUALIFICATIONS ATTAINED 日期 (月/年) Dates (MM/YYYY) 就識級別 現正/最後就讀學校名稱 B From 至 To
第五部份: 工作經驗 SECTION 5: WORK EXPERIENCE 日期 (月/年) Dates (MM/YYYY) 職位 Position Name and Address of Organisation 第六部份: 父母 / 監護人 / 至親資料 SECTION 6: PARTICULARS OF PARENT / GUARDIAN / NEXT OF KIN 姓名 Name: 電郵地址 電話* Relationship with Applicant: 電郵地址 電話* Tel. No.: Fax No.: 其他可聯絡之人士 (1) Name of Other Contact Person (1): 関係 Relationship: Tel. No.: 国共和 Tel. No.:
第五部份: 工作經驗 SECTION 5: WORK EXPERIENCE 日期 (月/年) Dates (MM/YYYY) 職位 Position Name and Address of Organisation 第六部份: 父母 / 監護人 / 至親資料 SECTION 6: PARTICULARS OF PARENT / GUARDIAN / NEXT OF KIN 姓名 Name:
SECTION 5: WORK EXPERIENCE 日期 (月/年) Dates (MM/YYYY) 職位
SECTION 5: WORK EXPERIENCE 日期 (月/年) Dates (MM/YYYY) 職位
SECTION 5: WORK EXPERIENCE 日期 (月/年) Dates (MM/YYYY) 職位
SECTION 5: WORK EXPERIENCE 日期 (月/年) Dates (MM/YYYY) 職位
田期 (月/年) Dates (MM/YYYY) 職位 機構名稱及地址 由 From 至 To Position Name and Address of Organisation 第六部份: 父母 / 監護人 / 至親資料 SECTION 6: PARTICULARS OF PARENT / GUARDIAN / NEXT OF KIN 姓名 與申請人關係 Relationship with Applicant: 電郵地址
用From 至To Position Name and Address of Organisation 第六部份: 父母 / 監護人 / 至親資料 SECTION 6: PARTICULARS OF PARENT / GUARDIAN / NEXT OF KIN 姓名 Name: 與申請人關係 Relationship with Applicant: 電郵地址 E-mail Address: Tel. No.: Fax No.: 其他可聯絡之人士 (1) Name of Other Contact Person (1): 関係 Relationship: 電話* Tel. No.: 厚証・ Tel. No.: 関係 Relationship: 電話* Tel. No.: 関係 Relationship: 電話*
第六部份: 父母 / 監護人 / 至親資料 SECTION 6: PARTICULARS OF PARENT / GUARDIAN / NEXT OF KIN 姓名 Name: 電郵地址 E-mail Address: 其他可聯絡之人士 (1) Name of Other Contact Person (1): 其他可聯絡之人士 (2) Neme of Other Contact Person (2): Relationship: 電話* Relationship: 電話* Relationship: 電話* Relationship: 電話* Relationship: 電話*
対している
対象
対象
対象
姓名 Name: 電郵地址 E-mail Address: 其他可聯絡之人士 (1) Name of Other Contact Person (1): 関係 Relationship:
Relationship with Applicant: 電郵地址 E-mail Address: 其他可聯絡之人士 (1) Name of Other Contact Person (1): 其他可聯絡之人士 (2) Relationship: 開係 Relationship: 開係 Relationship: 電話* Tel. No.: 開係 Relationship: 電話*
電郵地址 電話* Tel. No.: Fax No.: 其他可聯絡之人士 (1) 關係 電話* Tel. No.: 関係 Pelationship: 電話* Tel. No.: 国共他可聯絡之人士 (2) 關係 電話* Tel. No.: 国共他可聯絡之人士 (2) 图像 電話*
E-mail Address: 其他可聯絡之人士 (1) Name of Other Contact Person (1): 其他可聯絡之人士 (2) Name of Other Contact Person (2): Relationship: Fax No.: 電話* Tel. No.: 電話* Tel. No.:
其他可聯絡之人士 (1) 關係 電話* Tel. No.: 其他可聯絡之人士 (2) 關係 图台 Other Contact Person (3): 图像 图台 Other Contact Person (2):
Name of Other Contact Person (1): 其他可聯絡之人士 (2) Name of Other Contact Person (3): Relationship: Tel. No.: 電話*
其他可聯絡之人士 (2) 關係 電話*
Name of Other Contact Derson (2):
Tame of Giner Contact 1 of Con (2).
*請提供可接收香港短訊及 WhatsApp 訊息的手提電話號碼
Please provide mobile phone No. which is able to receive Hong Kong SMS & WhatsApp messages.
第七部份: 職業評估服務
SECTION 7: VOCATIONAL ASSESSMENT SERVICE
申請人曾否接受展亮職業評估服務? Has the applicant received Shine Vocational Assessment Service?
是 Yes 如曾接受展亮職業評估,請填寫:
If yes, please state:
檔案編號 評估日期
Reference No Date of Assessment:
□ 否 No 如否,請選擇評估地點:
If no, please indicate your choice of location:
□ 觀塘 Kwun Tong* □ 屯門 Tuen Mun □ 薄扶林 Pokfulam
只提供專項職業評估服務
Only provide Specific Vocational
A A A A
Assessment Service 注音: (1) 加中等人缺乏自我照顾能力,中等人須有照顧老院同進行誣体:
注意: (1) 如申請人缺乏自我照顧能力・申請人須有照顧者陪同進行評估;
注意: (1) 如申請人缺乏自我照顧能力 · 申請人須有照顧者陪同進行評估;
注意: (1) 如申請人缺乏自我照顧能力·申請人須有照顧者陪同進行評估; (2) 申請職業評估服務·必須由有關復康機構轉介。
注意: (1) 如申請人缺乏自我照顧能力 · 申請人須有照顧者陪同進行評估;
注意: (1) 如申請人缺乏自我照顧能力,申請人須有照顧者陪同進行評估;

*展亮技能發展中心(觀塘)- 牛津道暫遷校舍位於九龍塘牛津道 1D 號。 Shine Skills Centre (Kwun Tong) - Oxford Road Re-provisioned Campus is located at 1D Oxford Road, Kowloon Tong.

** 13 ** 73	A 1616 1				
第八部份: SECTION	•	月英文正楷填寫) * <i>請將不適用</i> ORGANISATION (Plea		.OCK letters)*Please delete	where inappropriate
機構名稱 Name of Or			ise complete in BE	轉介信編號(如適用) Letter Ref (if applicable	
聯絡人姓名	- <u>———</u> (教授/博士/先生/小姐]/女士/太太*) Mr / Miss / Ms / Mrs*) :		職位 Post:	
電郵地址 E-mail Addr	ess:		電話 Tel.No.:	傳真 Fax No.	:
機構地址 Organisatio	n Address:				
第九部份:	上課地點及課程	選擇 (只適用於報讀詞	果程)		
請參考課程一覧	夏表,並以 "✓" 選擇上診			licable for programn	ne application)
	課程編號 Programme Code	課程名和 Programme	<u> </u>	上課 [‡] Programm	
第一選擇 1 st choice				□觀塘 Kwun Tong* / [□薄扶林 Pokfulam	
第二選擇 2 nd choice				□觀塘 Kwun Tong* / [□薄扶林 Pokfulam	
第三選擇 3 rd choice				□ □ 觀塘 Kwun Tong* / [□ □ 薄扶林 Pokfulam	
第十部份: SECTION	•	用於報讀展亮技能發展 ERVICE (Only appli	` '	開辦的課程) (TM) programme ap	olication)
口於第九部份	選擇展亮技能發展中心	、(屯門),請選擇是否需要	中心宿舍服務。	ether Boarding Service is	,
注意:如選擇需要		接受並通過人宿前面試及自費體格		□ 是 Yes	□ 否 No
lote: All applic 第十一部份		hrough pre-admission intervi 作市惶推磨	ew and body check	at their own expenses.	
			L DATA FOR	PROMOTIONAL PUR	RPOSE
与關 VTC 及其 agree that m iddress and	t機構成員的任何課程 ny personal data provi	、招生及活動推廣資訊。如 ided, including my name, be used by the VTC an	コ不同意者・請在ス phone number, m	幾號碼、電郵地址、通訊地 5格內劃上 "√" 。 lobile number, email addr titutions. If you do not a	ess, correspondence
一 程度, I do no corres	提供有關 VTC 及其機 ot agree that my pers pondence address an	構成員的任何課程、招生》 onal data provided, includ d education level, may be	及活動推廣資訊。 Jing my name, ph used by the VTC a	號碼、手機號碼、電郵地域 none number, mobile num and its member institutions ents of VTC and its memb	ber, email address, s for providing direct

如你日後希望停止接收上述資訊,或更改個人資料,請連同你已登記的姓名、電話號碼、手機號碼、電郵地址及通訊地址,電郵至 vtpdo@vtc.edu.hk 或傳真至 2270 0970 通知我們。 If you would like to unsubscribe from receiving the said information or update your personal data, please send your request with registered name, phone number, mobile number, email address and correspondence address to vtpdo@vtc.edu.hk or by fax to 2270 0970.

*展亮技能發展中心(觀塘)- 牛津道暫遷校舍位於九龍塘牛津道 1D 號。

Shine Skills Centre (Kwun Tong) - Oxford Road Re-provisioned Campus is located at 1D Oxford Road, Kowloon Tong.

第十二部份: 收集個人資料聲明

SECTION 12: USE OF APPLICANT'S PERSONAL DATA

- (1) 申請人所填報的資料,包括姓名、電話號碼、手機號碼、電郵地址、通訊地址及教育程度,其用途如下:
 - (a) 處理一切有關展亮技能發展中心課程的入學申請及甄選事宜·及申請展亮職業評估服務之相關用途;
 - (b) 核對申請人申請紀錄,以及核對申請人在職業訓練局轄下院校及中心就讀的紀錄;
 - (c) 儲存獲取錄的申請人資料於學生紀錄系統;及
 - (d) 若申請人表示願意收到職業訓練局的資訊,職業訓練局及其機構成員,將使用申請人所填報的個人資料,提供有關職業訓練局及其機構成員的任何課程、招生及活動推廣資訊。申請人可於填寫申請表格時表示同意,否則本局不會使用其個人資料作相關用途。
- (2) 殘疾人士職業訓練處(下稱本處)會對申請人的資料絕對保密·但可將申請人的個人資料·給予對本處有保密承諾的任何人士或其代表·用於 (1) 段所述的用途。如申請人日後希望停止接收上述的資訊·或更改個人資料·請連同已登記的姓名、電話號碼、手機號碼、電郵地址及通訊地址·電郵至vtpdo@vtc.edu.hk 或傳真至 2270 0970 通知本處。
- (3) 根據個人資料(私隱)條例,申請人有權:
 - (a) 查閱殘疾人士職業訓練處是否持有他的個人資料;
 - (b) 要求獲得上述資料的副本;及
 - (c) 要求殘疾人士職業訓練處更正他的個人資料。

申請人必須提供足夠資料予殘疾人士職業訓練處以識別身份,否則本處有權拒絕上述要求。

- (4) 申請人如欲查閱個人資料,須以書面形式向殘疾人士職業訓練處提出。
- (5) 本處保留權利收取查閱資料所需行政費用。
- 1) The information collected from the application, including the name, phone number, mobile number, email address and correspondence address, will be used for the following purposes:
 - (a) for processing and selection of applications for admission to Shine Skills Centre programmes; and related purposes;
 - (b) for checking of application records and the study records of the programmes provided by member institutions under the VTC;
 - (c) for storage of information on the successful applicants in the Student Records System; and
 - (d) if the applicant indicated his / her wish to receive VTC information, the application data will be retained for providing direct marketing information in relation to any programmes, admission and events of VTC and its member institutions. VTC will seek his / her consent on the application form; the VTC cannot use the personal data without consent.
- (2) Vocational Training for People with Disabilities Office (VTPDO) undertakes to keep personal data provided by applicants confidential. However, VTPDO may provide such information to any other persons or agents for the purposes described in (1) under a duty of confidentiality to VTPDO. If an applicant would like to unsubscribe from receiving the said information or update his / her personal data, please send the request with registered name, phone number, mobile number, email address, correspondence address and education level to vtpdo@vtc.edu.hk or by fax to 2270 0970.
- B) In accordance with the Personal Data (Privacy) Ordinance, an applicant has the right:
 - (a) to check whether VTPDO holds his / her personal data;
 - (b) to request a copy of such data; and
 - (c) to require VTPDO to correct any of the personal data which is inaccurate.

Sufficient information will need to be provided to establish identity, otherwise VTPDO shall refuse to comply with the request.

- (4) Request for access to data should be submitted in writing to VTPDO.
- (5) In accordance with the terms of the Ordinance, VTPDO reserves the right to charge a fee for the processing of data access request.

第十三部份:申請人聲明及簽署

SECTION 13: APPLICANT'S DECLARATION AND SIGNATURE

- (1) 本人謹此聲明在本申請表格填報的資料均屬正確無誤·並明白填報之資料將會在職業訓練局轄下院校的招生過程中作參考之用。
- (2) 本人明白在註冊後,有關資料將轉作學生紀錄,職業訓練局可利用該等紀錄作學術或行政上之用。
- (3) 本人明白職業訓練局可能使用本人的入學申請資料作統計及分析用途·本人的申請表格及有關的個人資料會於收生程序完結後銷毀。然而·若本人於申請表格表示願意收到職業訓練局的資訊·則我的申請資料將被保留。
- 4) 本人明白提供任何虚假或誤導性資料會導致本人的申請資格被取消,雖經註冊,亦屬無效。
- (1) I declare that the information given in this application is, to the best of my knowledge, accurate and complete. I understand that this information will be used in the admission process of the Programmes offered by Vocational Training Council (VTC).
- (2) I understand that, upon my registration in a Programme in VTC, the data contained in this application will become part of my student record and may be used for all purposes relating to my study in VTC.
- (3) I understand that VTC may use my application data for statistical purposes. The application form and other related personal information will be disposed of after the completion of the admissions exercise. Nevertheless, if I have indicated in the application form that I wish to receive information about VTC, my application data will be retained.
- (4) I understand that provision of any false or misleading information therein shall lead to DISQUALIFICATION of my application without notice and cancellation of any resultant registration.

申請人姓名 Name of Applicant:	簽署 Signature:	
家長/監護人姓名 Name of Parent/Guardian:	簽署 Signature:	
日期 Date:		

展亮技能發展中心 課程申請人及其父母 / 監護人 / 至親須知

- (1) 申請人須年滿 15 歲並為香港永久性居民或無居留及工作限制之合法香港居民。
- (2) 報名表內之個人資料將被中心教職員用作甄選、統計和其他相關用途;及在職業介紹時·將申請人的個人資料透露給有意僱用申請人之僱主。
- (3) 提供不確實或不完整之資料將導致其申請被延誤或被取消資格。
- (4) 申請人如需要查詢其個人資料,請以書面向展亮技能發展中心院長提出。
- (5) 請將填妥之申請表格連同一切有關文件 (如醫療、心理、聽覺、職業評估或個案撮要等報告) 交回所選擇之展亮技能發展中心。
- (6) 本中心會安排申請人接受展亮職業評估服務·但申請人如於過去三年內曾接受該服務·則一般可獲豁免。
- (7) 出席面試或註冊入學時須帶同下列文件正本: (a) 香港永久性居民身份證 (非永久性居民須帶同香港身份證及簽證身份書 / 旅遊證件); (b) 有關學歷及履歷證件; 及 (c) 三十八毫米乘五十毫米證件近照乙張。

SHINE SKILLS CENTRE NOTICE TO THE APPLICANT AND PARENT / GUARDIAN / NEXT OF KIN

- (1) The applicant should reach aged 15 and be a permanent resident of Hong Kong or eligible to stay and work in Hong Kong without limitations by the Immigration Department.
- (2) Information provided will be used for selection, statistical data and other relevant or related purposes by administrative and instructional staff, and disclosed to potential employer(s) in the course of employment assistance when necessary.
- (3) Inaccurate or incomplete information will result in delay or disqualification of applications.
- (4) For enquiry of personal data, please address correspondence to the Manager of the Shine Skills Centre.
- (5) The completed application form and the relevant documents (e.g. medical, psychological, audiological, vocational assessment reports or case summary) should be returned to the chosen Shine Skills Centre.
- (6) Applicants will be referred to Shine Vocational Assessment Service for vocational assessment. Normally, an applicant will not be required to be re-assessed if he/she has received the service in the last three years.
- (7) Applicants who attend interview or registration should bring along the original copy of the following documents: (a) Hong Kong Permanent Resident Identity Card (Non-permanent residents should bring along their Hong Kong Identity Cards, Visas and Travelling documents); (b) relevant academic documents and employer's references; and (c) one 38 mm x 50 mm applicant's recent photo.

展亮技能發展中心各中心的地址及查詢電話如下:

The address and telephone number of Shine Skills Centres are as follows:

中心 Centre	地址 Address	電話號碼 Tel. No.	傳真號碼 Fax No.	電郵地址 Email Address	辦公時間 Office Hours
展亮技能發展中心(觀塘)- 牛津道暫遷校舍 Shine Skills Centre (Kwun Tong) – Oxford Road Re-provisioned Campus	九龍塘牛津道 1D 號 1D Oxford Road, Kowloon Tong, Kln	2270 0900	2357 4042	shinekt@vtc.edu.hk	星期一至五上午八時半至
展亮技能發展中心(屯門) Shine Skills Centre (Tuen Mun)	新界屯門豐安街 1 號 1 Fung On Street, Tuen Mun, N.T.	2452 8901	2457 6207	shinetm@vtc.edu.hk	下午五時 Mondays to Fridays 8:30a.m. –
展亮技能發展中心(薄扶林) Shine Skills Centre (Pokfulam)	香港薄扶林道 147 號 147 Pokfulam Road, H.K.	2538 3292	2538 3299	shinep@vtc.edu.hk	5:00p.m.
展亮職業評估服務 Shine Vocational Assessment Service	九龍塘牛津道 1D 號 1D Oxford Road, Kowloon Tong, Kln	2270 0950	2172 6020	shinevas@vtc.edu.hk	星期六、日及 公眾假期休息 Saturdays, Sundays &
展亮輔助器材及資源中心 Shine Technical Aids & Resource Centre	新界屯門豐安街 1 號 1 Fung On Street, Tuen Mun, N.T.	2452 7604	2452 7678	shinetarc@vtc.edu.hk	Public Holidays Closed

展亮技能發展中心網址 Shine Skills Centre Website



2023/24 學年課程一覽表 AY2023/24 Programme Overview

	全日制課程 [Full-time Pro	grammes			
課程編號 Programme Code	課程名稱 Programme Title	修讀期 Duration of Study	觀塘 ¹ Kwun Tong	屯門 Tuen Mun	薄扶林 Pokfulam	備註 Note
SS110101	辦公室實務 Office Practice		✓	✓	不適用 N.A.	-
SS110102	商業及零售服務 Commercial & Retailing Service	2 學年	√	✓	✓	-
SS110103	活動助理實務 Programme Assistant Practice		√	✓	不適用 N.A.	-
SS110201	電腦及網絡實務 Computer and Network Practice		√	✓	不適用 N.A.	-
SS110202	設計及桌上出版 Design and Desktop Publishing		√	✓	不適用 N.A.	-
SS110203	數碼商店營運 Digital Shop Operation		√	不適用 N.A .	√	-
SS110301	包裝服務 Packaging Service	2 years	√	✓	不適用 N.A.	-
SS110302	綜合服務 Integrated Service		√	✓	✓	2
SS110303	飲食業實務 Catering Service		√	✓	✓	2
SS110307	運動及康樂服務 Sports and Recreation Service		不適用 N.A.	✓	✓	-
SS110308	健康護理實務 Health Care Practice		√	✓	不適用 N.A.	-
SS110311	烘焙及咖啡店營運實務 Bakery and Café Practical Operation		不適用 N.A.	不適用 N.A .	✓	2, 3

備註 Note:

- 1. 展亮技能發展中心(觀塘)- 牛津道暫遷校舍位於九龍塘牛津道 1D 號。 Shine Skills Centre (Kwun Tong) –Oxford Road Re-provisioned Campus is located at 1D Oxford Road, Kowloon Tong.
- 2. 修讀此課程之學生,須於入學後接受一次自費的健康檢查,證明符合食物處理人員的健康水平。
 Students enrolling in this programme are required to pass a medical examination for food handler at their own expenses.
- 3. 烘焙及咖啡店營運實務課程上課地點:展亮·獅子會餐廳 [位於香港專業教育學院(摩理臣山)] 及 展亮技能發展中心(薄扶林)。 Class location of Bakery and Café Practical Operation Programme: Shine•Lions Clubs Café located at IVE(Morrison Hill) and Shine Skills Centre (Pokfulam).

	資歷架構(級別一)課程 QF(Lo	evel 1) Progra	ammes			
課程編號 Programme Code	課程名稱 Programme Title	修讀期 Duration of Study	觀塘 ¹ Kwun Tong	屯門 Tuen Mun	薄扶林 Pokfulam	備註 Note
SS111001	快餐店營運實務證書 Certificate in Fast Food Operation 資歷名冊登記號碼 QR Registration No. 18/000571/L1 資歷名冊登記有效期 Validity Period 01/09/2018 - 31/08/2026	1 學年 (全日制)	✓	√	不適用 N.A.	2
SS111002	零售業營運實務證書 Certificate in Retail Store Operation 資歷名冊登記號碼 QR Registration No. 18/000572/L1 資歷名冊登記有效期 Validity Period 01/09/2018 - 31/08/2026	1 year (Full time)	√	✓	不適用 N.A.	-
SS411003	基礎飲品及小食製作證書 Certificate in Basic Beverage and Snack Production 資歷名冊登記號碼 QR Registration No. 22/000254/L1 資歷名冊登記有效期 Validity Period 01/09/2022 - 31/08/2025	4 個月 (兼讀制)	√	不適用 N.A.	不適用 N.A.	-
SS411004	基礎職場電腦應用證書 Certificate in Basic Computer Applications in Workplace 資歷名冊登記號碼 QR Registration No. 22/000253/L1 資歷名冊登記有效期 Validity Period 01/09/2022 - 31/08/2025	4 months (Part time)	√	不適用 N.A.	不適用 N.A.	-

(適合畢	技能提升/技能再培訓課程 Up-Skillin 星業於綜合職業訓練中心或展亮技能發展中心人士修				and Shine)
課程編號 Programme Code	課程名稱 Programme Title	修讀期 Duration of Study	觀塘 ¹ Kwun Tong	屯門 Tuen Mun	薄扶林 Pokfulam	備註 Note
SS210401	飲食業實務(技能提升) Catering Service (Up-skilling)	6個月 (全日制)	√	不適用 N.A.	不適用 N.A.	2
SS210402	基礎茶餐廳廳面實務(技能再培訓) Basic Café Service (Re-skilling)	6 months (Full time)	√	不適用 N.A.	不適用 N.A.	2

備註 Note:

- 1. 展亮技能發展中心(觀塘)- 牛津道暫遷校舍位於九龍塘牛津道 1D 號。 Shine Skills Centre (Kwun Tong) – Oxford Road Re-provisioned Campus is located at 1D Oxford Road, Kowloon Tong.
- 2. 修讀此課程之學生,須於入學後接受一次自費的健康檢查,證明符合食物處理人員的健康水平。
 Students enrolling in this programme are required to pass a medical examination for food handler at their own expenses.