香港聖約翰救傷隊少青團

For Admin Region Use Only (R0313)

Received on:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Details Requested:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Checked By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hong Kong St. John Ambulance Brigade

# Cadet Command

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| 總區基金資助申請Application for Subsidy from Command Fund |

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| **甲部Part I** **有關申請之資料Information of the Application**活動/節目名稱及性質Name & Nature of Activity/Program |
| 活動/節目舉辦日期、時間及地點Date(s), Time and Venue of Activity/Program |
| 舉辦活動/節目目標Objectives of the Activity/Program |
| 預計參加者人數Anticipated Participants (please indicate clearly number of officers and cadets/recruits according to divisions if more than one involved) |
| 收支預算Budget |
| 收入Income總收入： | 支出Expenditure總支出： |
| 申請資助額Amount of Subsidy Request | 港幣HK$ |
| 申請預支款項Application for Advance Payment \*需要Yes（金額 ）/無需No |
| 收款人姓名Name of Recipient（無需預支者不用填寫） | 申請書遞交不足45天，預支款項申請恕不授理 |
| 申請人簽署Signature of Applicant | 日期Date |
| 申請人姓名Name of Applicant | 職級Rank |
| 支隊/聯隊Division/Corps / Region No. Corps遞交申請時必須夾附已簽批/待批核之活動申請便箋 |
| **聯隊主管加簽 Endorsement by Corps-in-charge** |
| 聯隊主管簽署Signature of Corps-in-Charge | 日期Date |
| **乙部Part II 分區主管推薦Recommendation from Region-in-Charge***\*支持申請Application supported / 不支持not supported.*Please indicate reasons for “Not supported” or add in any additional comments/suggestions. |
| 分區主管簽署Signature of Region-in-Charge | 日期Date |
| 姓名Name | 職級Rank \*CSupt / SSupt(OIC) 分區Region \*A / B / C / Admin. |
| **丙部Part III**  **助理總監推薦/批准****Recommendation/Approval by Assistant Commissioner***\*申請批准Approved / 推薦請求批准Recommended for approval.*Additional Remarks (if any): |
| 簽署Signature | 日期Date |
| Dr. John Fenn  | Assistant Commissioner |
| **丁部Part IV**  **總監批准****Approval by Commissioner** (for subsidy over HK$5,000.00)*\* 申請批准Approved / 不獲批准Not Approved*Additional Remarks (if any): |
| 簽署Signature | 日期Date |
| 姓名Name | Commissioner |

\*請將不適用者刪去Please delete as appropriate.