



Information Form for Unison Job Notice Board

Employer Information

Company Name in English					
Company Name in Chinese					
Contact Person (* Ms. / Mr.)					
E-mail address		Tel No.		Fax No.	
Nature of business					

Job Application Method

Receive resumes by	<input type="checkbox"/> E-mail	<input type="checkbox"/> Fax
	<input type="checkbox"/> Post (Address: _____)	
	<input type="checkbox"/> Walk in (Address: _____)	

Job Information

Job Title		No. of Vacancy(ies)	
Job Duties			
Is the job temporary?	<input type="checkbox"/> No <input type="checkbox"/> Yes (from _____ to _____)		
Working days per week	_____ days <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
Working hours per day	_____ hours <input type="checkbox"/> Day Shift <input type="checkbox"/> Night Shift <input type="checkbox"/> Specific: _____		
District of work place			
Salary Offered:	\$ _____ per month / day / hour		
Required Education			
Working Experience	<input type="checkbox"/> Not required <input type="checkbox"/> Required (____ years)		

Language Requirement

Ability to speak, listen, read, and write (please use ✓ required; ✗ preferable; ✕ not required)

	Speak	Listen	Read	Write
Cantonese (Traditional Chinese)				
Putonghua (Simplified Chinese)				
English				
Others (please specify _____)				

Remarks:

Points to Note

1. Before filling in this form, you have to guarantee that the person(s) recruited for the post is /are **direct employee(s)** of you / your company and would come under **the protection of the Employment Ordinance**, as well as that all activities carried out by you / your company are lawful. In addition, you must also ensure that the information provided in this form is true, correct and based solely on genuine recruitment needs, and the terms of employment as well as job descriptions, etc. are consistent with the actual employment offer.
2. You / your company should pay the employee(s), to whom the Minimum Wage Ordinance applies, hired to fill this post wages no less than the Statutory Minimum Wage (SMW) rate as specified in the Ordinance. Please visit <http://www.labour.gov.hk/eng/news/mwo.htm> for details of the Ordinance.
3. Under the Employees' Compensation Ordinance, all employers are required to take out employees' compensation insurance to cover their liabilities both under the Ordinance and at common law for work injuries sustained by their employees (including full-time and part-time employees). If you / your company encounter(s) difficulties in acquiring employees' compensation insurance cover, you / your company may apply to join the Employees' Compensation Insurance Residual Scheme. For Scheme details, please visit the website of the Employees' Compensation Insurance Residual Scheme Bureau <http://www.ecirsb.com.hk>.
4. The terms of employment, entry requirements and job descriptions of the post must **NOT** violate the Sex Discrimination Ordinance, the Disability Discrimination Ordinance, the Family Status Discrimination Ordinance and the Race Discrimination Ordinance. You should consider the genuine job requirements of the post and follow the relevant codes of practice against discrimination in employment. Please do not specify any requirements on the gender, age or race of the job seekers or any other discriminatory terms.
5. When you collect personal data from job seekers (e.g. resumes), you should observe the Personal Data (Privacy) Ordinance, disclose your company name and provide the contact person and contact means for job seekers to obtain Personal Information Collection Statement. For details, please visit the website of the Privacy Commissioner's Office <http://www.pcpd.org.hk>.
6. You / your company should arrange for the employee(s) to join a registered Mandatory Provident Fund (MPF) scheme (if applicable).
7. You / your company must not solicit money or other advantages in any form or under any title, no matter for reasons of provision of services or training, selling of goods, referral of service, guarantee deposit and so on from job-seeker(s). We will not process any Information Form which involves pre-employment or unpaid training.
8. Please complete the form **English in black ink and block letters**. The Information Form will be sent to job seekers as filled. We will not edit it.
9. Please take into account the genuine occupational needs when setting the entry requirements including **language requirement** for your vacancy. Adopting a more relaxed language requirement could open up your vacancy to a larger pool of candidates, including the ethnic minorities, and help you / your company find the right candidate more speedily.
10. **Each information form will remain valid for 2 months**. Hong Kong Unison will upon receipt process your / your company's Information Form weekly (on Friday). Please do not submit the same form during the recruitment process or when the Information Form is still valid. If you have changed your contact means / terms of employment, or the vacancy is filled, please notify Hong Kong Unison immediately.
11. During job interviews, you should check carefully the identity documents of the job seekers, and ascertain that they are lawfully employable in Hong Kong when job offers are made. (For details, please visit the website of the Immigration Department <http://www.immd.gov.hk>.) You should also inform job seekers of the interview results as soon as possible.
12. Hong Kong Unison reserves the right to refuse to process any Information Form.

STATEMENT OF PURPOSES FOR PERSONAL DATA (PD)

Purpose of Collection: The PD as provided by you to Hong Kong Unison or by means of the Information Form will be used for matters related to processing your job recruitment. The provision of PD by you is voluntary. If you do not provide sufficient information, we may not be able to introduce job seekers to you.

Classes of Transferees: The PD provided by you in the Information Form will be disclosed to job seekers and other NGOs that provide employment services for ethnic minorities. Subject to your consent, your company's name, contact person and contact means will be sent as shown on Information Form to job seekers.

Access to PD/ Enquiries: You have a right of access and correction in respect of your PD as provided for in Sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of record of your PD. Enquiries concerning your PD collected by means of Information Form including the making of access and corrections, should be addressed to the Administration and Finance Officer, Hong Kong Unison, 1 Elm Street, Unit 1303, Tai Kok Tsui, Kowloon. Telephone No: 2789 3246.

Declaration (Employer or authorized representative please sign on this statement)

1. Our company / I hereby declare that the information provided in this form is true, correct and based solely on genuine recruitment needs, and the terms of employment, entry requirements (including requirement on language proficiency) and job duties, etc. of the job posting and any amendments thereafter are consistent with the actual employment offer, relevant, justifiable and do not violate the Sex Discrimination Ordinance, the Disability Discrimination Ordinance, the Family Status Discrimination Ordinance and the Race Discrimination Ordinance. Our company / I understand that our company / I will commit an offence and will be liable on conviction to a fine if our company / I knowingly or recklessly make a statement in this form which in a material respect is false or misleading.
2. The job applicant(s) to fill the post advertised in the Information Form is/are our company/my direct employee(s). The employee(s) is/are covered by the Employment Ordinance and all activities carried out by our company / me are lawful.
3. Our company / I will not engage in selling of investment products which are regulated by the Securities and Futures Commission Ordinance, Securities and Futures Commission (SFC), unless our company is a SFC Licensed Person/ Registered Institution (if applicable).
4. Our company / I have read the Points to Note of this Information Form, and agree to follow the terms and conditions.

Company Rep / Employer (Full name in Block Letters): _____ **Post:** _____

Company Rep / Employer Signature or Company Chop: _____ **Date:** _____

Note: This form should be completed by authorized representative of the company / employer. Any person submitting this form in the name of the company/employer without authorization may be referred to law enforcement agencies for investigation.