

香港特別行政區政府
2026年非華裔學生實習計劃申請書
Application Form for Internship Programme for Non-ethnic Chinese Students 2026
in the Government of the Hong Kong Special Administrative Region

申請人須知 Notes for Applicants:

- (a) 就本實習計劃而言，非華裔人士不涵蓋華僑（即父母雙方均為華裔人士）。然而，若父或母一方為華裔的混血兒，則可被視為非華裔人士。
For the purpose of this internship programme, overseas Chinese (i.e. both parents are of Chinese ethnic origin) are not regarded as non-ethnic Chinese. Nevertheless, people who are mix-raced with one parent of Chinese origin will be regarded as non-ethnic Chinese.
- (b) 申請人如欲申請其他政府實習計劃的實習空缺，請另行向有關部門作出申請。
Should applicant wish to apply for intern vacancy of other internship programme(s) in the Government, please make separate application to the relevant department(s).
- (c) 請用黑色／藍色墨水筆或原子筆，以正楷填寫申請書。
Please complete the form in block letters and in black or blue ink.
- (d) 申請人須填寫A部至D部，並提供正確資料。遞交申請書後，本申請書內所提供的資料（包括你的香港特別行政區永久性居民的身分）如有任何更改，你必須通知公務員事務局負責人員。
Applicants should complete Sections A to D and ensure that the information provided is accurate. You are required to notify the subject officer of the Civil Service Bureau if there are any subsequent changes to the information provided, including any change to your permanent resident status of the Hong Kong Special Administrative Region, after submission of the application form.
- (e) 申請人如未能提供所需的資料，申請書可能不獲受理。
Your application may not be considered if you fail to provide the requested information.
- (f) 申請人所提供的資料，將用於與本實習計劃有關的招聘工作以及其他與僱用有關的事宜上。
The information provided will be used for recruitment relating to this internship programme and other employment-related purposes.
- (g) 遞交申請書後，如欲更改或查詢個人資料，請與公務員事務局負責人員聯絡（電郵地址：csbappt@csb.gov.hk）。
For correction of or access to personal data after submission of the application form, please contact the subject officer of the Civil Service Bureau (e-mail address: csbappt@csb.gov.hk).

申請人編號 Candidate No. _____

(只供有關部門填寫 Official use only)

A部 Section A

(I) 個人資料 Personal Particulars

英文姓名

Name in English

(姓氏 Surname)

(名字 Other names)

中文姓名

Name in Chinese

中文姓名電碼

Chinese Name in Code

請貼上近照
Please affix your
recent photo here

出生日期

Date of Birth

日DD 月MM 年YYYY

出生地點

Place of Birth

香港身分證號碼

Hong Kong Identity Card Number

()

性別

Sex

☐

男

Male

☐

女

Female

你是否香港特別行政區永久性居民？

Are you a permanent resident of the Hong Kong Special Administrative Region?

☐

是

Yes

☐

否

No

(如對香港特別行政區永久性居民身分有任何疑問，可致電入境事務處查詢熱線 2824 6111。)

(If in doubt, you are advised to make enquiry about your eligibility for the permanent resident status in the Hong Kong Special Administrative Region through the Immigration Department Hotline 2824 6111.)

聯絡電話／流動電話

Contact telephone number / mobile phone

電郵地址

E-mail address

住址

Residential Address

分區

District

國家／地區

Country/Region

在香港居留時間（請按日期先後填寫） Length of Residence in Hong Kong (with dates in chronological order)

由（月／年）
From (Month/Year)

至（月／年）
To (Month/Year)

期間
Duration

年
Year(s)

月
Month(s)

年
Year(s)

月
Month(s)

年
Year(s)

月
Month(s)

年
Year(s)

月
Month(s)

合計

Total

年
Year(s)

月
Month(s)

過去曾否連續36個月或以上不在香港？

Have you been absent from Hong Kong for a continuous period of not less than 36 months?

☐

是

Yes

☐

否

No

如有，請列出有關期間：

If yes, please list out the relevant period:

有關期間：

Relevant Period:

由

From

至

To

(II) 學歷（按考獲資格的日期順序列出） Academic Attainment (in chronological order)

學院／頒發機構 (例如：香港考試及評核局) Institute/Issuing Authority (e.g. Hong Kong Examinations and Assessment Authority)	頒發日期 (日／月／年) Date Issued (DD/MM/YYYY)	學歷 (例如：香港中學文憑考試) Qualifications (e.g. Hong Kong Diploma of Secondary Education Examination)	及格科目及成績 (例如：應用學習中文(非華語學生適用)(達標)、英國語文(4)) Subjects Passed and Level Attained (e.g. Applied Learning Chinese (for non-Chinese speaking students) (Attained), English Language (4))

(III) 教育程度 (按就讀日期順序列出) Education Level (in chronological order)

曾經／現正就讀的學校、學院、大學 Schools, Colleges, Universities, etc. Attended/Attending	課程名稱／主修學科／就讀年級 (例如：學士學位；文學士；主修地理；三年級) Course/Major Area of Study/Year of Study (e.g. Bachelor of Arts, Major in Geography; Year 3)	就讀地方 (例如：香港) Place of Study (e.g. Hong Kong)	就讀日期 (月／年) Date (MM/YYYY)	
			由 From	至 To
小學 Primary School:				
中學 Secondary/High/Middle School:				
大學 University:				
現正就讀的學位之預計完成日期： Expected completion date of the current degree :			(月／年) (MM/YYYY)	

(IV) 特別技能及知識（例如：影片製作） Special Skills and Knowledge (e.g. video editing)

[illegible]

(V) 社區／課外活動（例如：學生會） Community / Extra-Curricular Activities (e.g. Student Union)

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B部 Section B

(I) 請形容你在聽、說、讀、寫方面的中文語文能力水平及提供在公開考試獲取的最佳中文科成績（如有）－ Please describe your Chinese language proficiency in listening, speaking, reading and writing and provide the best result(s) obtained in Chinese Language subject in public examination (if any) –
(II) 請註明你掌握的其他語言（如有）以及相應的能力水平（母語／流利／能應付基本溝通／初階）－ Please indicate other language(s) that you know (if any) and your proficiency level (native speaker / fluent / basic communication / elementary) –
(III) （可選擇是否填寫）請註明你希望在本計劃下獲派的實習工作性質（例如與就讀科目相關的工作）。你最終所獲派的實習工作性質會按各部門的實際運作需要而定，並 <u>不一定</u> 是你在下方填寫的實習工作性質。 (Optional) Please indicate the nature of work you would like to be assigned under this Programme (e.g. works related to the discipline you are studying). Please note that the nature of work of the internship would be subject to the operational needs of various departments, and may <u>not</u> be the same as that you indicate below.
(IV) （可選擇是否填寫）請問你是否殘疾人士？如為殘疾人士，請註明你的殘疾性質及程度，以及在實習期間是否需要特別的安排（例如工作區域、需要特別輔助器材等）－ (Optional) Are you a candidate with disability? If yes, please indicate the nature and degree of your disability and specify whether you need any special arrangement during the internship (e.g. working district, special aids required, etc.), if any –
（註：政府在遴選時對殘疾人士及其他申請人會一視同仁。申請人如需獲得為殘疾人士而設的聘任相關安排，有關部門可能要求提交醫生證明其為殘疾人士。） (Note: Candidates with disabilities are considered on equal terms with other applicants. The Government may require medical proof of their disability if candidates wish to make use of the appointment arrangements applicable to candidates with disabilities.)

如被錄用，請以優先次序填寫適合你的實習期（“1”為最高，“2”為最低）。
In order of preference (i.e. “1” as the most preferred, “2” as the least preferred), please indicate the internship period(s) suitable to you if employed.



2026年6月15日至2026年8月7日
15 June 2026 – 7 August 2026



2026年6月29日至2026年8月21日
29 June 2026 – 21 August 2026

C部 Section C

請提供一篇字數不超過200字的文章（中英文皆可），分享對參加本實習計劃的期望，以及就如何在公共服務上加強支援非華裔人士提供意見／建議。
Please provide an essay of no more than 200 words (either in Chinese or English) sharing your expectations for this internship programme and your views/suggestions on enhancing support for non-ethnic Chinese in the provision of public service.

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D部 Section D

你曾否經香港或香港以外的法庭判定有罪？

Have you ever been found guilty of an offence in a court of law whether or not in Hong Kong?

☐

是
Yes

☐

否
No

如經判定有罪，請列明詳情

If yes, please give details

(註： 請在下列所有方格內加上“✓”號，表示你已閱讀，明白及接受此部所列明之所有條件，否則你的申請將不獲處理。)

(Note : Please insert a “✓” in all the boxes below to indicate that you have read, understood and accepted all conditions specified at this Section. Otherwise, your application will not be processed further.)

本人明白倘若故意在填寫本申請書時虛報資料或隱瞞重要事實，或未有在申請書內所提供資料已作更改後通知公務員事務局，可令本人喪失獲政府錄用的資格；即使已獲政府錄用，亦可遭終止聘用。

I understand that if I wilfully give any false information or withhold any material information in this application form, or fail to notify the Civil Service Bureau of any subsequent change of information provided, it will render me liable to disqualification for employment by the Government or to termination of employment, if already employed by the Government.

本人同意政府可就進行與政府招聘工作及僱用有關的事宜，及為核實上述資料而進行必要的查詢。本人授權所有政府部門及其他組織或機構可就這些查詢，透露任何有關的紀錄及資料。本人亦授權香港警務處處長或其代表把所有關於我的犯罪紀錄及詳情發放予有關政府部門／當局／機構。就我的職位申請，我也同意當有需要時，可套取我的指紋以核實我的犯罪紀錄。

I consent to the Government making any necessary enquiries for purposes relating to recruitment by and employment with the Government and for the verification of the information given above. I authorise all government departments and other organisations or agencies to release any record or information as may be required for these enquiries. I also authorise the Commissioner of Police, or his representative, to release full particulars of any and all criminal convictions recorded against me to relevant government departments/authorities/agencies. I also agree to my fingerprint impressions being taken by the Police in connection with this application, if required for the purpose of verifying my criminal records.

本人明白並同意，如有需要，上述資料會送交獲授權處理有關資料的政府部門及其他組織或機構，用以進行與政府招聘工作，以及其他僱用和人力資源管理有關的事宜。

I understand and accept that the information given above will be provided to government departments and other organisations or agencies authorised to process the information for recruitment, other employment-related and human resource management-related purposes as may be necessary.

日期Date

簽署Signature
