Hong Kong Institute of Vocational Education (IVE)

Engineering Discipline

Annex 2

For NHD

Sub-Discipline (CN) Construction PB

Department of Construction / Morrison Hill Campus

Application Form for Module Exemption of Practical Training Modules based on academic qualifications or relevant experience with documented evidence of attainment of the required learning outcomes

11 A		/		lent Number:
				phone No.:
rogram	nme Code / Title:	/		
	Code(s) / Title(s) of Level 2	Practical Training module	(s) applied for exemption	n (please tick)
	CON2190 Pra	ctical Training A		
	CON2191 Pra	ctical Training B		
	ation(s) tick and submit the o	copies of the evidence docu	ments with application f	form)
Rec	cognized training/q	ualifications for direct ex	emption of CON2190 a	nd /or CON2191*
	Completion of CIO equivalent	CTA Training with 23 hour	s or above of relevant m	odule training areas or
		C Pro-Act Centre / IVE Waining areas or equivalent	orkshop* Training wit	h 23 hours or above of
	For CON2191 Certified true copy or equivalent	of valid 'Construction Indu	ıstry Safety Training Cei	rtificate' (Green Card)
	or equivalent			
)	-	Experience (must be comp	leted by the applicant)	
	-	Experience (must be comp		Position held & Job nature
	Record of Working			Position held & Job nature
D No.	Record of Working Oate (MM/YYYY) of years of relevant	Name of Organization &	Nature of Business	
D No.	Record of Working Oate (MM/YYYY) of years of relevant orms T1/T2* and For	Name of Organization &	Nature of Business	ule training areas.

Notes to Applicants:

- 1. When submitting the application form(s) for module exemption, student should bring with himself/herself the original evidence documents accompanied with one photocopy for each document for verification by the Department.
- 2. Applicant may be required to attend an interview and / or assessment to verify his/her working experience by the Programme Team if necessary. Assessment fees will be charged where necessary.
- 3. The due date for submitting the application form(s) for module exemption is **20 April 2018.** Late application will not be considered.
- 4. The Programme Leader / Coordinator will announce the results of the applications for module exemption for the modules by late May 2018.
- 5. The applicants for module exemption are advised to attend all classes of the modules concerned and to fulfill all module requirements (such as continuous assessment) until they receive written confirmation of the result of their applications for module exemption.
- 6. Applicants must submit their completed application form(s) together with a copy of payment receipt of non-refundable payment of \$100 per module to the Department of Construction, Rm 220, IVE(MH) during office hours.

For Campus Secretariat Use		
☐ Student's ID Card and record checked		
Signature of Staff:	Date:	
☐ A handling fee of HK\$ has been received	Receipt No.	
Signature of Staff:	Date:	
☐ MSRP2103M in SRS updated.		
Signature of Staff:	Date:	
Recommendation		
Module Leader	_	
Signature	Date	
Supported by Programme Leader/Coordinator* (Signature / Name)		Yes / No *
Explanation		
(if not supported)		
Approved by Head of Department (Signature / Name)		Yes / No *
Explanation		
(if not approved)	Date	

^{*} Delete where applicable

^{\$} Please refer to Payment Methods Listed in the Exemption Form(From HQ(AS))

FORM T1

1	. T	-				
	N	O	Т	ρ	C	1

- 1. This form should be completed by the <u>EG114103 / EG314103 / EG524103 / EG114111 / EG524111 / EG114112*</u> student applying for exemption of Practical Training module.
- 2. Student's company should verify that the correctness of the information provided by the student with an **official chop** at the bottom right corner of this form.

Student's Name:	Class:	
Student Number:	Phone No.:	

No 1	Module Intend On completion o expected to be al recognize occ health in pra suitable perso	Practical Training A led Learning Outcomes f the module, students are ble to: cupational safety and ctical training by wearing onal protective equipment easures to protect personal	Minimum duration of relevant employment or training required for exemption (hours based on FT mode)	Duration of full-time employment of direct work by the applicant in the module area (hours)	Period of full-time employment of the Student in the area (Month/Year) e.g. 9/2014~now
2	1	s-on experience of the hniques relevant to	6		
3	- acquire hand	s-on experience of the hniques relevant to	6		

^{*} Delete where applicable

_____ Company Chop
Signature of Student

FORM T2

Notes:

- 1. This form should be completed by the <u>EG114103 / EG314103 / EG 524103 / EG114111 / EG524111 / EG114112*</u> student applying for exemption of Practical Training module.
- 2. Student's company should verify that the correctness of the information provided by the student with an **official chop** at the bottom right corner of this form.

Student's Name:	Class:	
Student Number:	Phone No.:	

No	CON2191/ Practical Training B Module Intended Learning Outcomes On completion of the module, students are expected to be able to:	Minimum duration of relevant employment or training required for exemption (hours based on FT mode)	Duration of full-time employment of direct work by the applicant in the module area (hours)	Period of full- time employment of the Student in the area (Month/Year) e.g. 9/2014~now
1	- recognize occupational safety and health in practical training by wearing suitable personal protective equipment and taking measures to protect personal health;	10		
2	 acquire hands-on experience of the skills and techniques relevant to painting; 	6		
3	- acquire hands-on experience of the skills and techniques relevant to brickwork .	6		
4	- Understand the potential hazards and safety measures on construction sites and eligible of awarding the 'Construction Industry Safety Training Certificate'	7	Applicant must certified true co own valid 'Cor Industry Safety Certificate' (Gr	opy of his / her enstruction Training

^{*} Delete where applicable

Company Chop

Signature of Student

For NHD

FORM T3

<u>Confirmation Form</u> <u>for Employment in the Relevant Field</u>

Name of Company	
Address of Company	
Name / Post of Undersigned Person	
Contact information of the Authorized Person (telephone, e-mail)	
Name / Post / Student ID Number of the Student for Module Exemption	
I,	, of
(Name / Post of the Under	signed Person) (Name of Company)
confirm that	has been / was* employed in our
(Name/Post of the S	udent for Module Exemption)
company for the period from	to
I also confirm that the informat	on in the enclosed Form(s) T1 / T2* is/are correct.
(Signature)	
Date:	Company Chop
* Delete where applicable	Company Chop