



Equal Opportunity Employer Recognition Scheme Application Form

To: Equal Opportunities Commission
16/F, 41 Heung Yip Road
Wong Chuk Hang, Hong Kong

Tel: 2511 8211

Email: eoemployer@eoc.org.hk

Fax: 2511 8142

Website: www.eoc.org.hk/s/eoemployer

Part 1 – Details of Company / Organisation / Government Bureau or Department

Name of Organisation: _____

Address: _____

Tel: _____ Fax: _____

Website (if any): _____

Category:

Private enterprises

Listed companies

Companies with 100 or more employees in Hong Kong

Small- and medium-sized enterprises¹

Public organisations²

Total number of employees in Hong Kong: _____

Years of operation: _____

Business Registration Certificate / Company Registration Number / Registration under Section 88 of the Inland Revenue Ordinance / Others: _____
(please attach a copy)

Nature of Business:

Manufacturing

Non-manufacturing

Others: _____

¹ Manufacturing enterprises with fewer than 100 employees, and non-manufacturing enterprises with fewer than 50 employees

² Non-governmental organisations, social enterprises, statutory and public bodies, chambers of commerce, professional bodies, Government bureaux and departments



Nature of Organisation:

- | | | |
|---|---|--|
| <input type="checkbox"/> Government Bureau / Department | <input type="checkbox"/> Non-governmental Organisation | <input type="checkbox"/> Public / Subvented Body |
| <input type="checkbox"/> Statutory Body | <input type="checkbox"/> Chamber of Commerce | <input type="checkbox"/> Professional Body |
| <input type="checkbox"/> Employers' or Management Association | <input type="checkbox"/> Educational Institution and University | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Social Service Organisation | | |

Field of Business: (Can check more than one box)

- | | | |
|---|---|--|
| <input type="checkbox"/> Accounting Services | <input type="checkbox"/> Advertising, Marketing and Public Relations Services | <input type="checkbox"/> Apparel and Fashion Design |
| <input type="checkbox"/> Automobile Services | <input type="checkbox"/> Banking, Financial and Credit Services | <input type="checkbox"/> Business Management and Consultancy Services |
| <input type="checkbox"/> Cleaning Services | <input type="checkbox"/> Construction and Engineering | <input type="checkbox"/> Convention, Exhibition and Event Management |
| <input type="checkbox"/> Courier Services, Logistic Management and Freight Management | <input type="checkbox"/> Design Services | <input type="checkbox"/> Education & Training |
| <input type="checkbox"/> Entertainment | <input type="checkbox"/> Environmental Protection Services | <input type="checkbox"/> Government Organisations |
| <input type="checkbox"/> Information Technology | <input type="checkbox"/> Insurance | <input type="checkbox"/> Legal Services |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Media and Communications | <input type="checkbox"/> Medical, Nursing and Healthcare Services |
| <input type="checkbox"/> Personal Care Services | <input type="checkbox"/> Printing, Publishing and Packaging | <input type="checkbox"/> Property Development, Property Management and Real Estate |
| <input type="checkbox"/> Public Utilities and Public Services | <input type="checkbox"/> Retail | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Security Services | <input type="checkbox"/> Shipping and Maritime Services | <input type="checkbox"/> Technology, Research & Development |
| <input type="checkbox"/> Telecommunications | <input type="checkbox"/> Tourism and Travel | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Others (Please specify): _____ | | |

Part 2 – Contact Person in Company / Organisation / Government Bureau or Department

Contact Person: _____

(Title: Mr / Ms / Miss / Mrs / Others _____)

Position: _____

Tel No: _____ Fax No: _____

Email: _____

Mailing Address: *(if different from above)*

We are applying for the following award category: (Each applicant may choose more than one category. Please tick as appropriate.)

- Gender Equality (please complete **Form 2A**)
- Equality for Diverse Abilities (please complete **Form 2B**)
- Family Status Equality (please complete **Form 2C**)
- Racial Equality and Inclusion (please complete **Form 2D**)

Part 3 – Declaration

Our company / organisation hereby agrees and declares that:

1. The information provided in this form is true and accurate. We will provide additional information to the EOC if required.
2. When using the Equal Opportunity Employer Logo, we will not, implicitly or explicitly, state that the EOC approves the products or services of our company / organisation and we agree to comply with the terms and conditions on using the Logo issued by the EOC.

Submitted by: _____ Position: _____
(Name)

Signature: _____ Date: _____

Privacy Statement

All information submitted by the participating organisation will be used for the purpose related to the Equal Opportunity Employer Recognition Scheme only. The EOC is committed to fully complying with the data protection principles and all relevant provisions of the Personal Data (Privacy) Ordinance (Cap. 486). Should the participating organisation wish to check and correct the data, please contact the EOC at 2511 8211. For details about the EOC privacy protection policy, please visit the EOC website www.eoc.org.hk.