THE MARITIME AND AVIATION TRAINING FUND
海運及空運人才培訓基金

Maritime and Aviation Training Fund
Maritime Services Traineeship Scheme – Marine Insurance
Progress Report on Traineeship

(I) Particulars of Traineeship

Name of Insurance Company/Broker Firm ("the Applicant") : _____

Name of Trainee : _____

Name of Trainer : _____

Training Period : From _____ (DD/MM/YY) to _____ (DD/MM/YY)

Corresponding Disbursement Application (please '√' as appropriate) :

☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ ___ claim

(II) Training Progress

(Please complete below with reference to Section C: Particulars of Training Programme in the Application Form (Form 1) submitted by the Applicant)

(a) Internal Training (please '√' as appropriate)

Scope of Shipping Practice	Basic Skills Trained	No. of Hours *(Percentage of training completed against the whole training programme)*
☐ Cargo insurance	_____	_____ (____ %)
☐ Marine hull insurance	_____	_____ (____ %)
☐ Marine Protection & Indemnity and/or marine related liability	_____	_____ (____ %)
☐ Others: _____	_____	_____ (____ %)

(b) External Training

Title of Course or Activity	Organiser or Trainer	Date and Duration

(c) Evaluation, audit and review conducted on the traineeship with findings

_____

_____

_____

(III) Signature, Declaration and Consent :

I, the undersigned, is the authorised person [Note 1] of the Applicant, hereby confirm and declare that :

1. I have read and understood the terms and conditions, and agreed with all the obligations and responsibilities, as set out in the "Guidance Notes for Application";
2. the Applicant has continual maritime-related businesses;
3. the Applicant consents to have the information provided in connection with this report disclosed, without further reference to the Applicant, to Government policy bureaux/departments, statutory bodies or third parties for the purposes of processing this report, conducting research and survey, compiling statistics, meeting requirements of the law and/or performing their functions and disbursing funding and/or related purposes;
4. the Applicant authorises the Secretariat of the Maritime and Aviation Training Fund and the HKSAR Government to handle information provided in relation to this report, including and not limited to the disclosure of the information to other parties, in accordance with the "Guidance Notes for Application" and whenever the HKSAR Government considers appropriate; and
5. the information provided in this report is true and accurate and complete. I understand that if any information provided in connection with this report is inaccurate or misleading, the application for disbursement of monthly subsidy will be rejected forthwith and the HKSAR Government reserves all rights to take further action it deems appropriate.

Note 1 The progress report must be signed by the authorised person, being a director, the company secretary and/or such other authorised persons of the applicant, who is accountable for providing the information in connection with this report.

Signed by the authorised person, being a director, the company secretary and/or such other authorised persons of the Applicant:

Signature of Authorised Person : _____

Full Name : _____

Position : _____

Telephone No. : _____

E-mail Address : _____

Date : _____

Official Organisation Stamp