

Post-Registration Certificate Course in Primary Health Care Nursing
(District Health Center Module April 2023)
Application Form

The personal data provided in this form will be used for processing your application by the Course Registrar.

Please return the following document to The Hong Kong Academy of Nursing, LG1 Princess Margaret Hospital Nurses Quarters, 232 Lai King Hill Road, Kowloon on/before 28 February 2023 and stating 'Application for PRCC' on the envelope

1. Completed Application Form;
2. Copy of practising certificate;
3. Copy of relevant qualification / academic certificates; and
4. A crossed cheque at HK\$12,000 made payable to "The Hong Kong Academy of Nursing Limited"

1. PERSONAL INFORMATION

Name : (In Block Letters as of HKID Card)		
Dr./Mr./Mrs./Ms.	(Last name)	(First Name) (Chinese)
Address :		
Email Address :	Office Contact No.	Mobile No.

2. PRESENT EMPLOYMENT STATUS

Currently Employed : Yes / No

Name & Address of Current Employer	
Position	Department

3. QUALIFICATIONS

Professional Body / Institution	Professional Licence / Certificate	Year Attained
Nursing Council of Hong Kong	RN (G) / RN (Psy) / RM No. :	

University / College	Academic Qualification	Year Attained

3. MEMBERSHIP

Organization	Type of Membership	Membership No.
HK Academy of Nursing	Fellow / Ordinary	

Signature of Applicant

Date :