

## Personal & Bank Information Form

(Full/part-time staff members shall use the form "FO1001", not this one. Do NOT resubmit this form if you have previously done so.)

### Personal Information

<b>English Name</b> <i>(The name must be exactly the SAME as that shown in your identity card, passport and bank account.)</i>			
Mr./Mrs./Ms./Dr./Prof. <i>(delete whichever is inapplicable)</i>			
Family Name	<input style="width: 100%;" type="text"/>		
First Name	<input style="width: 100%;" type="text"/>		
Middle Name	<input style="width: 100%;" type="text"/>		
<b>Chinese Name</b> <i>(if any)</i>	<b>Contact Phone No.</b>	<b>Email Address</b>	<b>Date of Birth</b> <i>(dd/mm/yyyy)</i> <i>(for retirement benefit scheme enrolment)</i>
<i>(The data collected in this box is for tax reporting purpose.)</i>			
<b>HKID card no:</b> _____ ( )	<b>Sex</b> <i>(please tick)</i>	<b>Marital Status</b> <i>(please tick)</i>	
<b>Passport no and Country:</b> _____ <i>(for those without HKID cards)</i>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Single/Divorced <input type="checkbox"/> Married	
<b>Correspondence Address</b> _____			
<b>Country</b> _____			

### Bank Account Information

<b>For payment to a local bank account via autopay</b>	
Bank Name : _____	
Bank Account :	<input style="width: 100%;" type="text"/>
Bank Code	Bank Account Number
<i>(The bank account number should be less than 16 digits and credit card number will not be accepted.)</i>	
<b>For overseas payment via telegraphic transfer</b> <i>(Unless otherwise specified, the beneficiary has to bear the charge of the beneficiary bank.)</i>	
<b>Beneficiary (Receiving) Bank Details</b>	<b>Beneficiary (i.e. Payee) Details</b>
Bank Name:	Full Name:
Address <i>(including City and Country)</i> :	Account No./IBAN :
Bank Code/ SWIFT Code :	Telephone No. <i>(mandatory for mainland individual):</i>

### PERSONAL INFORMATION COLLECTION STATEMENT

1. The data provided in this form shall be released to banks, government authorities and/or other units of the University for payment processing, tax reporting and MPF processing.
2. Unless required by law, the data collected will not be disclosed to any third parties other than those specified above without your consent.
3. If the data provided is incomplete or inaccurate, the banks will not be able to process any payment to you.
4. This form will be destroyed after 3 months from the date of receiving this form.
5. You have a right of access and correction in respect of the data contained in this form under the Personal Data (Privacy) Ordinance. Please raise such request(s) to the Data Protection Officer of the Finance Office at [fodpo@LN.edu.hk](mailto:fodpo@LN.edu.hk).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date