Education Bureau Circular No. 9/2009

From : Secretary for Education
To : Supervisors/Heads of all aided secondary schools, caput schools, special schools with a secondary section
Ref. : EMB(NET ADM)/ENET/1/3
c.c. : Supervisors/Heads of all private secondary schools/DSS schools, Heads of Sections/Government secondary schools
Date : 21 July 2009

Enhanced Native-speaking English Teacher (NET) Scheme in Secondary Schools

Payment of Fringe Benefits

SUMMARY

This circular aims to update the details on how to assess the eligibility of the Native-speaking English Teachers (NETs), in particular for those joining the NET Scheme for the first time and for NETs with changes in his/her personal or family particulars which might affect the entitlement, for the fringe benefits provided under the Enhanced NET Scheme in Secondary Schools and the procedure of processing the applications for such benefits. This circular supersedes the Education and Manpower Bureau Circular Memorandum No. 198/2004 dated 14 September 2004 on the same subject.

DETAILS

Certification for ‘normal place of residence’

2. NETs are entitled to passages, baggage allowance, special allowance and medical allowance provided under the Enhanced NET Scheme only if their normal place of residence is outside Hong Kong. For a NET to establish that his/her normal place of residence is outside Hong Kong, he/she should satisfy the following criteria:

   (i) possessing permanent resident status in a country/place outside Hong Kong; and
   (ii) his/her social ties being outside Hong Kong.

3. In this connection, the NETs are required to complete and submit NET-Form A to their schools for consideration. The NET is required to provide supplementary information by completing NET-Form A (Annex). The school should send the completed NET-Form A and NET-Form A (Annex), attached with relevant supporting documents, to the Secretary for Education for consideration.
4. Once a NET’s normal place of residence is established to be outside Hong Kong and his/her eligibility for the fringe benefits under the Enhanced NET Scheme in Secondary Schools or the NET Scheme in Primary Schools is certified, the NET should continue to be eligible for the fringe benefits when re-appointed under these Schemes in the same or another public sector school without break of service, unless there are changes in his/her personal or family particulars which might affect the entitlement.

**Prevention of double benefits**

5. When certifying the eligibility of a NET for the fringe benefits, schools should note that the NET is required to declare that he/she or his/her spouse is not receiving any similar benefits. A NET will not be eligible for the Special Allowance if he/she or his/her spouse is already receiving the same allowance or any other housing benefits from his/her own employer. Similarly, a NET will not be eligible for passages, baggage and medical allowance if he/she or his/her spouse is provided with similar benefits by his/her employer. All NETs receiving fringe benefits under the Enhanced NET Scheme should be required to report changes of marital status and family particulars, which may affect their entitlement, to the schools. Schools should then re-assess the NETs’ eligibility for the fringe benefits.

**Applications**

6. The following standard application forms are attached for use of the NETs in secondary schools:

   - NET-Form A: Declaration on Normal Place of Residence
   - NET-Form B: Application for Special Allowance
   - NET-Form C: Application for Reimbursement of Passages/Baggage Allowance
   - NET-Form D: Application for Reimbursement of Medical Insurance Premium Payment
   - NET-Form E: Application for Advance of Salary

Completed application forms A - E should be certified by the schools and forwarded directly to the NET Administration Team of the Education Bureau for processing. All receipts/invoices/used air tickets in support of the applications should be kept in the schools and made available for inspection as and when necessary.

**ENQUIRY**

7. For enquiry, please contact your Senior School Development Officer.

Sheridan LEE
for Secretary for Education
Enhanced Native-speaking English Teacher (NET) Scheme in Secondary Schools
Declaration on Normal Place of Residence

Notes:
1. For a NET to establish that his/her normal place of residence is outside Hong Kong, he/she should satisfy the criteria as set out in Part I below.
2. The completed NET-Form A and NET-Form A (Annex) and the supporting documents listed in the attached checklist should be sent by the school to the Secretary for Education for consideration.

Please insert a ✓ in the appropriate box

* Delete as appropriate

PART I (To be completed by the NET)

To: Supervisor/Principal of ___________________________ (School)

1. I declare that:

☐ (i) I possess permanent resident status in ___________________________ (Name of country).

☐ (ii) My social ties are outside Hong Kong.

☐ (iii) I have resided outside Hong Kong continuously for at least 5 years immediately before taking up an appointment under the NET Scheme in a secondary school in Hong Kong (if applicable).

In support of the above claim of my normal place of residence outside Hong Kong, supplementary information is provided in NET-Form A (Annex) and supporting documents are attached.

2. [To be completed by married NET]

I declare that my spouse is / is not * employed under the Enhanced NET Scheme in Secondary Schools or the NET Scheme in Primary Schools. If the answer is in the affirmative, please provide the employment details of your spouse as specified below:

Full Name of My Spouse: ____________________________________________

Name of School: _________________________________________________

Contract Period: from ___ to ___

3. I declare that the above information is complete and correct. I confirm that I have read and understood the EDB Circular No. 9/2009 including the Notes for Completing NET-Forms A-E. I understand that if I give any false or incorrect information, I shall render myself liable to disciplinary/legal proceedings and disqualification from receiving the fringe benefits provided under the Enhanced NET Scheme in Secondary Schools.

Signature of NET ___________________________ Date ___________________________

Full Name of NET ___________________________

1. For a NET to establish that his/her normal place of residence is outside Hong Kong, he/she should satisfy the criteria as set out in Part I below.
2. The completed NET-Form A and NET-Form A (Annex) and the supporting documents listed in the attached checklist should be sent by the school to the Secretary for Education for consideration.
PART II  (To be completed by the school)

To:  Secretary for Education
    [Attn: Education Officer (NET Administration)]

Room 1110, 11/F, Wu Chung House
213 Queen’s Road East
Wanchai, Hong Kong

1. I certify that ____________________________________________________ (Full name of the NET) is appointed under the Enhanced NET Scheme in Secondary Schools in my school from ______________________ to ______________________.

2. I have checked that the NET has:
   (i)  completed Part I and Annex of the NET-Form A; and
   (ii) submitted the required supporting documents as listed in the attached checklist.

3. I have checked the documents provided by the NET in support of his/her declaration in Part I above and found the information correct. It is considered that:
   [ ] the NET’s normal place of residence is outside Hong Kong. He/She is eligible to apply for the fringe benefits provided under the Enhanced NET Scheme in Secondary Schools for appointees whose normal place of residence is outside Hong Kong.
   [ ] the NET’s normal place of residence is not outside Hong Kong. He/She is therefore not eligible for the fringe benefits provided under the Enhanced NET Scheme in Secondary Schools for appointees whose normal place of residence is outside Hong Kong.

4. The application and copies of relevant documents certified by the school in support of the NET’s application are forwarded herewith for your consideration.

Signature of Supervisor/Principal* ________________________________ Date __________

Name of Supervisor/Principal* Mr/Mrs/Ms/Miss*

Name of School ________________________________ (School Code: __________)

School Address ______________________________________________________ Fax no. ____________________

Contact person for enquiry Mr/Mrs/Ms/Miss* Tel. no. ____________________
PART III (To be completed by the NET Administration Team, Education Bureau)

To: Supervisor/Principal of ________________________________ (School)

Re: ________________________________ (Full Name of the NET)

☐ There is no objection to the NET’s claim that his/her normal place of residence is outside Hong Kong. He/She is eligible to apply for the fringe benefits provided under the Enhanced NET Scheme in Secondary Schools for the appointees whose normal place of residence is outside Hong Kong.

☐ It is considered that the NET’s normal place of residence is not outside Hong Kong. He/She is therefore not eligible for the fringe benefits provided under the Enhanced NET Scheme in Secondary Schools for appointees whose normal place of residence is outside Hong Kong.

Please advise the NET of the above result accordingly.

Signature ________________________________

Name ________________________________

Post ________________________________

Date ________________________________

c.c. : SSDO(__________) - for information

Recurrent Subventions Section/Funds Section - for records

---- END ----
**Enhanced Native-speaking English Teacher (NET) Scheme in Secondary Schools**

**Declaration on Normal Place of Residence**

**Supplementary Information**

*Delete as appropriate*

1. Full name of applicant  
   Mr/Mrs/Ms/Miss*

2. Place of birth  
   3. Nationality/Nationalities held

4. Holder of Hong Kong Permanent Identity Card  
   Yes/No *

5. Full name of spouse  
   Mr/Mrs/Ms*
   Place of birth  
   Nationality/Nationalities held
   Holder of Hong Kong Permanent Identity Card  
   Yes/No *

6. Residence **outside Hong Kong** since birth (in chronological order) (periods of excursion visits should be excluded)

<table>
<thead>
<tr>
<th>From (mm/yyyy)</th>
<th>To (mm/yyyy)</th>
<th>Place of residence</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

7. Period(s) of Residence **in Hong Kong** since birth (in chronological order)

<table>
<thead>
<tr>
<th>From (mm/yyyy)</th>
<th>To (mm/yyyy)</th>
<th>Purpose (Please provide the name of employer in case of employment)</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

8. Particulars of children

<table>
<thead>
<tr>
<th>Full name</th>
<th>Date of birth (dd/mm/yyyy)</th>
<th>Place of birth</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

9. Details of house(s), flat(s) or business owned, in Hong Kong or overseas, including address (documentary evidence of ownership must be produced)

   (a)
   (b)

10. Full name of your father

    His place of birth  
    His nationality

    His present address
11. Full name of your mother
   Her place of birth
   Her nationality
   Her present address

12. Details of parents’ employment in Hong Kong, if any

<table>
<thead>
<tr>
<th>From</th>
<th>To</th>
<th>Name and address of employer(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Father</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td></td>
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</tr>
</tbody>
</table>

13. Full name of spouse’s father
   His place of birth
   His nationality
   His present address

14. Full name of spouse’s mother
   Her place of birth
   Her nationality
   Her present address

15. Particulars of brothers/sisters

<table>
<thead>
<tr>
<th>Full name</th>
<th>Place of birth</th>
<th>Present address</th>
</tr>
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<tr>
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</tbody>
</table>

16. Particulars of close relatives residing in Hong Kong

<table>
<thead>
<tr>
<th>Full name</th>
<th>Relationship with you</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

17. If members of your family (e.g. parents, brothers, sisters) have emigrated overseas, please give details
   (documentary evidence must be produced, if required):

<table>
<thead>
<tr>
<th>Relationship with you</th>
<th>Date of emigration</th>
<th>Country</th>
</tr>
</thead>
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</tbody>
</table>

18. Where do you consider is your normal place of residence? (please give reasons if your normal place of
   residence is outside Hong Kong)

   ____________________________________________
   ____________________________________________
   ____________________________________________
19. If you consider that your normal place of residence is outside Hong Kong, please give reasons for coming to Hong Kong:

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

20. If you consider your social ties are in places other than Hong Kong, please give reasons:

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

21. If you are employed on terms which do not provide for your periodically visiting or revisiting your normal place of residence, do you consider that such employment represents a material degree of dislocation or uprooting from the environment to which you belong? If the answer is in the affirmative, please give reasons:

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

22. If you wish to provide further information about yourself and your family, please use the space below:

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

23. I understand that if I wilfully give any false information or withhold any material information, I shall render myself liable to dismissal if I have been appointed to the post under the Enhanced NET Scheme in Secondary Schools.

Signature

_________________________________________________________________________

Full Name (in block letters)

_________________________________________________________________________

Date

_________________________________________________________________________
Checklist of Supporting Documents

(To be completed by the NET and checked by the school)

Please insert a ✓ in the appropriate box

☐ Certified copy of passport or relevant documents to verify nationality of the NET, with relevant pages showing condition of stay in Hong Kong

☐ Certified copy of passport or relevant documents to verify nationality of the NET’s spouse, with relevant pages showing condition of stay in Hong Kong

☐ Certified copies of documentary evidence to prove the NET’s residence outside Hong Kong as stated in paragraph 6 of this form, including:

☐ birth certificate
☐ degree transcripts
☐ reference letters/graduation certificates from primary school/secondary school/college
☐ reference letters/certificates of service from previous employers
☐ employment records
☐ tenancy agreement
☐ rates/electricity bills
☐ others (Please specify ________________________________)

☐ Documentary evidence of ownership of house(s), flat(s) or business in Hong Kong or overseas as stated in paragraph 9 of this form
Enhanced Native-speaking English Teacher (NET) Scheme in Secondary Schools
Application for Special Allowance

Note: Only the ORIGINAL copy of the form and any subsequent amendments will be accepted.

* Delete as appropriate

PART I (To be completed by the NET)

To: Supervisor/Principal of __________________________________________________________ (School)

1. I hereby apply for Special Allowance for Native-speaking English Teachers employed under the Enhanced NET Scheme in Secondary Schools.

2. I declare that I am not receiving a Special Allowance under the Enhanced NET Scheme in Secondary Schools or any other financial assistance/allowance/benefits from the Government of the Hong Kong Special Administrative Region or other sources to rent or acquire accommodation in Hong Kong.

3. [To be completed by married NET]
   (a) I declare that my spouse is / is not * employed under the Enhanced NET Scheme in Secondary Schools or the NET Scheme in Primary Schools. If the answer is in the affirmative, please provide the employment details of your spouse as specified below:

      Full Name of My Spouse: __________________________________________________________

      Name of School: __________________________________________________________

      Contract period: from __________ to __________

   (b) I declare that my spouse is not receiving a Special Allowance under the Enhanced NET Scheme in Secondary Schools or any other financial assistance/allowance/benefits from the Government of the Hong Kong Special Administrative Region or other sources to rent or acquire accommodation in Hong Kong. I undertake to inform you and to cease drawing the Special Allowance immediately once my spouse begins to receive such financial assistance/allowance/benefits.

4. I agree to abide by the provisions of the Special Allowance for Native-speaking English Teachers employed under the Enhanced NET Scheme in Secondary Schools.

5. I undertake to report to the school any changes of my marital status and family particulars that might affect my entitlement to the Special Allowance.

6. I confirm that I have read and understood the EDB Circular No. 9/2009 including the Notes for Completing NET-Forms A-E and the stipulations related to Special Allowance in the Memorandum on the Terms and Conditions of Service.

Signature of NET ___________________________ Date ___________________________

Full Name of NET ___________________________
PART II  (To be completed by aided schools / special schools with secondary section only)

To: Secretary for Education
   [Attn: Education Officer (NET Administration)]
   Room 1110, 11/F, Wu Chung House
   213 Queen’s Road East
   Wanchai, Hong Kong

1. I certify that the applicant ____________________________ (Full Name) is:
   (a) appointed as a Native-speaking English Teacher under the Enhanced NET Scheme in Secondary Schools in my school from _________________ to _________________. (For the contract renewed/appointment contract period extended, the previous appointment/extension contract period was from _________________ to _______________.); and
   (b) eligible for the grant of Special Allowance in the amount of HK$__________ each month as specified in the NET’s contract with effect from _________________ (i.e. the date when the appointment/extension contract period starts).

2. I should be grateful if you would arrange the payment.

Signature of Supervisor/Principal* ____________________________ Date ________________
Name of Supervisor/Principal*  Mr/Mrs/Ms/Miss*
Name of School ____________________________ (School Code: ________)
School Address __________________________________________ Fax no. ________________
Contact person for enquiry Mr/Mrs/Ms/Miss* ____________________________ Tel. no. ________________

Part III  (To be completed and retained by caput schools)

1. I certify that the applicant ____________________________ (Full name) is appointed as a Native-speaking English Teacher under the Enhanced NET Scheme in Secondary Schools in my school from _________________ to _________________. (For the contract renewed/appointment contract period extended, the previous appointment/extension contract period was from _________________ to _______________.); and

2. The grant of Special Allowance to the NET in the amount of HK$__________ each month as specified in the NET’s contract with effect from _________________ is approved.

Signature of Supervisor/Principal* ____________________________ Date ________________
Name of Supervisor/Principal*  Mr/Mrs/Ms/Miss*
Name of School ____________________________
Part IV (To be completed by the NET Administration Team, Education Bureau)

I confirm that (Full Name of the NET) has already established that his/her normal place of residence is outside Hong Kong and he/she is entitled to receive the Special Allowance.

Signature: ____________________________
Name: ______________________________
Post: ________________________________
Date: ________________________________

Part V (To be completed by the Funds Section, Finance Division, Education Bureau)

<table>
<thead>
<tr>
<th>Received on</th>
<th>Input Prepared by</th>
<th>Date</th>
<th>Checked by</th>
<th>Date</th>
</tr>
</thead>
</table>

---- END ----
### Notes:

1. The exchange rate to be used for the purpose of reimbursement is the mid-market rate as at the first working day of the month in which the passage begins. For seeking reimbursement before the homeward travel, the mid-market rate as at the first working day of the month in which the claim is submitted would be used.
2. Only the ORIGINAL copy of the form and any subsequent amendments will be accepted.

<table>
<thead>
<tr>
<th>Notes:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>The exchange rate to be used for the purpose of reimbursement is the mid-market rate as at the first working day of the month in which the passage begins. For seeking reimbursement before the homeward travel, the mid-market rate as at the first working day of the month in which the claim is submitted would be used.</td>
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<tr>
<td>2.</td>
<td>Only the ORIGINAL copy of the form and any subsequent amendments will be accepted.</td>
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</tbody>
</table>

Please insert a ✔ in the appropriate box. * Delete as appropriate

## PART I (To be completed by the NET)

To: Supervisor/Principal of ___________________________ (School)

1. Particulars of NET and family members

<table>
<thead>
<tr>
<th>Name in full</th>
<th>Date of birth (dd/mm/yyyy)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Myself</td>
<td></td>
</tr>
<tr>
<td>(b) My spouse</td>
<td></td>
</tr>
<tr>
<td>(c) Child(ren) who is/are unmarried and under the age of 18</td>
<td></td>
</tr>
</tbody>
</table>

2. □ I hereby apply for reimbursement of SINGLE passage and submit the receipt(s) /and boarding pass(es) for reimbursement of air fares as shown below.

Destinations declared for this application: From ____________________________ to ____________________________

Air passage taken/to be taken and amount claimed for:

<table>
<thead>
<tr>
<th></th>
<th>Direct/indirect route</th>
<th>Commencement of the journey on (dd/mm/yyyy)</th>
<th>Completion of the journey on (dd/mm/yyyy)</th>
<th>Actual expenses** (Please specify the currency)</th>
<th>Amount claimed# (Please specify the currency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Myself</td>
<td>direct/indirect *</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(b) My spouse</td>
<td>direct/indirect *</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(c) Child(ren)</td>
<td>direct/indirect *</td>
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<tr>
<td></td>
<td>direct/indirect *</td>
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<tr>
<td>TOTAL</td>
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</table>

3. □ I hereby apply for reimbursement of RETURN passage and submit the receipt(s) /and boarding pass(es) for reimbursement of air fares as shown below.

Destinations declared for this application: Between ____________________________ and ____________________________

Air passage taken/to be taken and amount claimed for:

<table>
<thead>
<tr>
<th></th>
<th>Direct/indirect route</th>
<th>Commencement of the journey on (dd/mm/yyyy)</th>
<th>Completion of the journey on (dd/mm/yyyy)</th>
<th>Actual expenses** (Please specify the currency)</th>
<th>Amount claimed# (Please specify the currency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Myself</td>
<td>direct/indirect *</td>
<td></td>
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<tr>
<td>(b) My spouse</td>
<td>direct/indirect *</td>
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<tr>
<td>(c) Child(ren)</td>
<td>direct/indirect *</td>
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<td></td>
<td>direct/indirect *</td>
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<tr>
<td>TOTAL</td>
<td></td>
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</table>

** The actual expenses are the actual costs of the air tickets including airport tax as shown on the receipt, net of any other expenses such as accommodation.

# If the applicant is entitled only for single passage(s) but bought return ticket(s), the amount claimed should be 50% of the airfare.
4. □ I hereby apply for reimbursement of baggage allowance and submit the receipts/invoice of my baggage expenses at a total of _____________________ (please specify the currency).

□ In-bound to Hong Kong baggage allowance
   I declare that this baggage claim is made upon my first appointment under the NET Schemes and I understand that no baggage allowance will be provided for any subsequent appointment under the NET Schemes.

□ Out-bound to country of origin baggage allowance
   I declare that this baggage claim is made upon completion of an appointment under the NET Schemes, be it the first appointment or any subsequent appointment under the NET Schemes, and I will not be in another employment with schools falling under the Schemes’ purview (i.e. government, aided or caput schools).

5. [To be completed by married NET]
   I declare that my spouse is / is not * employed under the Enhanced NET Scheme in Secondary Schools or the NET Scheme in Primary Schools. If the answer is in the affirmative, please provide the employment details of your spouse as specified below:

   Full Name of My Spouse: ____________________________________________

   Name of School: ________________________________________________

   Contract Period: ________________________________________________
   from ___________________ to _____________________

6. I declare that I and my family members are eligible for the passage /and baggage* allowance claimed and that I and my family are not receiving any double passage /and baggage* benefit arising from my employment with the school and my spouse’s employment. I undertake to notify the school at once should there be any subsequent change to this information.

7. I confirm that I have read and understood the EDB Circular No. 9/2009 including the Notes for Completing NET-Forms A-E and the stipulations related to passage allowance and baggage allowance in the Memorandum on the Terms and Conditions of Service.

Signature of NET ___________________________ Date __________________

Full Name of NET __________________________________________

Part II (To be completed by aided schools / special schools with secondary section only)

To: Secretary for Education
   [Attn: Education Officer (NET Administration)]
   Room 1110, 11/F, Wu Chung House
   213 Queen’s Road East
   Wanchai, Hong Kong

1. I certify that the applicant is:
   (a) appointed as a Native-speaking English Teacher under the Enhanced NET Scheme in Secondary Schools in my school from ________________ to ________________, (For the contract renewed/appointment contract period extended, the previous appointment/extension contract period was from ________________ to ________________); and
   (b) eligible for the grant of the following:
      ☐ passage allowance [please complete para. 2 below]
      ☐ in-bound to Hong Kong baggage allowance [please complete para. 3 below]
      ☐ out-bound to country of origin baggage allowance [please complete para. 4 below]

2. (a) Details of the passage(s) and amount of allowance claimed as shown in Part I para. 2/para. 3 above have been checked and found: ☐ correct.
    ☐ incorrect and amened in red.
(b) Quotation of economy class air passage by the most direct route obtained by the school:

Name of Airline: ________________________________

<table>
<thead>
<tr>
<th></th>
<th>Passage quoted</th>
<th>Quoted price</th>
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</thead>
<tbody>
<tr>
<td>Teacher</td>
<td>single/return *</td>
<td>HK$</td>
</tr>
<tr>
<td>Teacher’s spouse</td>
<td>single/return *</td>
<td>HK$</td>
</tr>
<tr>
<td>Teacher’s child(ren)</td>
<td>single/return *</td>
<td>HK$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
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</tbody>
</table>

(c) Amount of passage allowance approved:

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<thead>
<tr>
<th></th>
<th>Passage entitled</th>
<th>Amount approved @ (Please specify the currency)</th>
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</thead>
<tbody>
<tr>
<td>Teacher</td>
<td>single/return *</td>
<td></td>
</tr>
<tr>
<td>Teacher’s spouse</td>
<td>single/return *</td>
<td></td>
</tr>
<tr>
<td>Teacher’s child(ren)</td>
<td>single/return *</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

@ The amount approved should be the amount claimed by the applicant in Part I para. 2/para. 3 which has been checked and duly corrected by the school, or the quoted price shown in 2(b) above, whichever is the less.

3. I certify that the applicant is entitled to an in-bound to Hong Kong baggage allowance at the single/married* rate. The amount to be reimbursed is HK$___________________.

4. I certify that the applicant is entitled to an out-bound to country of origin baggage allowance at the single/married* rate. The amount to be reimbursed is HK$___________________.

5. I certify that relevant receipt(s) / invoice(s) / boarding pass(es) have been sighted by me and are kept in the school for record purpose. I should be grateful if you would arrange the payment.

Signature of Supervisor/Principal* ________________________________ Date ________________________________

Name of Supervisor/Principal* Mr/Mrs/Ms/Miss*

Name of School ________________________________ (School Code: _ _ _ _ )

School Address

Fax no. ________________________________

Contact person for enquiry Mr/Mrs/Ms/Miss* ________________________________ Tel. no. ________________________________

Part III (To be completed and retained by caput schools)

1. The grant of the following is approved:
   - ☐ passage allowance [please complete para. 2 below]
   - ☐ in-bound to Hong Kong baggage allowance [please complete para. 3 below]
   - ☐ out-bound to country of origin baggage allowance [please complete para. 4 below]

2. (a) Details of the passage(s) and amount of allowance claimed as shown in Part I para. 2/para. 3 above have been checked and found:
   - ☐ correct.
   - ☐ incorrect and amended in red.

(b) Quotation of economy class air passage by the most direct route obtained by the school:

Name of Airline: ________________________________
### NET-Form C (revised 6/2015)

#### Part I

<table>
<thead>
<tr>
<th>Passage quoted</th>
<th>Quoted price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher</td>
<td>single/return *</td>
</tr>
<tr>
<td>Teacher’s spouse</td>
<td>single/return *</td>
</tr>
<tr>
<td>Teacher’s child(ren)</td>
<td>single/return *</td>
</tr>
<tr>
<td></td>
<td>single/return *</td>
</tr>
</tbody>
</table>

**TOTAL:** HK$

(c) **Amount of passage allowance approved:**

<table>
<thead>
<tr>
<th>Passage entitled</th>
<th>Amount approved @</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher</td>
<td>single/return *</td>
</tr>
<tr>
<td>Teacher’s spouse</td>
<td>single/return *</td>
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<td>single/return *</td>
</tr>
<tr>
<td></td>
<td>single/return *</td>
</tr>
</tbody>
</table>

**TOTAL:** @

The amount approved should be the amount claimed by the applicant in Part I para.2/para. 3 which has been checked and duly corrected by the school, or the quoted price shown in 2(b) above, whichever is the less.

3. I certify that the applicant is entitled to an in-bound to Hong Kong baggage allowance at the **single/married** rate. The amount to be reimbursed is HK$___________________.

4. I certify that the applicant is entitled to an out-bound to country of origin baggage allowance at the **single/married** rate. The amount to be reimbursed is HK$___________________.

5. **I certify that relevant receipt(s) / invoice(s) / boarding pass(es) have been sighted by me and are kept in the school for record purpose.**

   Signature of Supervisor/Principal*  
   Name of Supervisor/Principal*  
   Name of School  

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### Part IV (To be completed by the NET Administration Team, Education Bureau)

I confirm that (Full Name of the NET) has already established that his/her normal place of residence as outside Hong Kong and he/she is entitled to receive the Passage/Baggage Allowance (please specify currency if not in Hong Kong Dollar) as follows:

(a) **Passage Allowance:**

(b) **In-bound to Hong Kong Baggage Allowance:**

(c) **Out-bound to Country of Origin Baggage Allowance:**

   Signature:  
   Name/Post:  
   Date:  

---

### Part V (To be completed by the Recurrent Subventions Section, Finance Division, Education Bureau)

<table>
<thead>
<tr>
<th>Received on</th>
<th>Input Prepared by</th>
<th>Date</th>
<th>Checked by</th>
<th>Date</th>
</tr>
</thead>
</table>

--- END ---
Enhanced Native-speaking English Teacher (NET) Scheme in Secondary Schools
Application for Reimbursement of Medical Insurance Premium Payment

Please insert a ✓ the appropriate box               *Delete as appropriate

PART I (To be completed by the NET)
To: Supervisor/Principal of ____________________________ (School)

1. I hereby apply for the reimbursement of medical insurance premium payment for myself / and my family member(s)* included in paragraph 3 below for the ________/_______ school year.

2. My family status is
   □ single
   □ single and accompanied by children
   □ married and accompanied by spouse and/or children
   □ married, unaccompanied by spouse and/or children

3. Details of the insurance policy
   (i) Name of the Insurance Company: ____________________________
   (ii) Details of family members in Hong Kong insured:


   Name  |   Relationship  |   Date of Birth (dd/mm/yyyy)
   -----------------|------------------|---------------------
       |            |                        |
   Husband/Wife*

   (iii) Insured period (i.e. the period covered by the policy):
         From _____________________ (dd/mm/yyyy) to _____________________ (dd/mm/yyyy)

4. I attach herewith the receipt(s) of my medical insurance premium payment at a total of HK$ _________________. (Please specify the currency if not in Hong Kong Dollars.)

5. [To be completed by married NET]
I declare that my spouse is / is not * employed under the Enhanced NET Scheme in Secondary Schools or the NET Scheme in Primary Schools. If the answer is in the affirmative, please provide the employment details of your spouse as specified below:
   Full Name of My Spouse: ____________________________
   Name of School: ____________________________
   Contract Period: from ________/_______ to ________/_______

6. I declare that I and my family members included in this application are eligible for the medical allowance claimed and that I and my spouse are not receiving any double medical benefit arising from my employment with the school and my spouse’s employment. I undertake to notify the school at once should there be any subsequent change to this information.

7. I confirm that I have read and understood the EDB Circular No. 9/2009 including the Notes for Completing NET-Forms A-E and the stipulations related to medical allowance in the Memorandum on the Terms and Conditions of Service.

Signature of NET ____________________________ Date __________________

Full Name of NET ____________________________
Part II (To be completed by aided schools / special schools with secondary section only)

To: Secretary for Education
[Attn: Education Officer (NET Administration)]
Room 1110, 11/F, Wu Chung House
213 Queen’s Road East
Wanchai, Hong Kong

1. I certify that the applicant _____________________ (Full name):
   (a) is appointed as a Native-speaking English Teacher under the Enhanced NET Scheme in Secondary Schools in my school from ________________ to ________________ (For the contract renewed/appointment contract period extended, the previous appointment/extension contract period is from ________________ to ________________);
   (b) is eligible for reimbursement of medical insurance premium payment at the single / married * rate; and
   (c) have applied / have not applied * for reimbursement of medical insurance premium payment for the ________/_______ school year as specified in paragraph 1 of Part I.

2. The grant of reimbursement of medical insurance premium payment for the period from ________________ to ________________ in the amount of HK$ ________________ (please specify the currency if not in HK Dollars) is approved. I should be grateful if you would arrange the payment.

** If the coverage period of the insurance begins before or extends beyond the NET’s contract period, reimbursement of the medical insurance premium will be made on a pro-rata basis, up to the maximum amount specified in the contract. For example, if the insurance premium costing HK$1,500 covers an insured period from 1.10.2013 to 30.9.2014 but the NET’s contract expires on 15.8.2014, the amount to be reimbursed will be HK$1,310.96 (HK$1500 ÷ 365 days × 319 days).

3. I certify that relevant receipts have been sighted by me and are kept in the school for record purpose.

Signature of Supervisor/Principal* 
Name of Supervisor/Principal* Mr/Mrs/Ms/Miss*
Name of School ____________________________ (School Code: _ _ _ _ )
School Address ____________________________ Fax no.
Contact person for enquiry Mr/Mrs/Ms/Miss* ____________________________ Tel. no. ____________________________

Part III (To be completed and retained by caput schools)

1. I certify that the applicant _____________________ (Full name):
   (a) is appointed as a Native-speaking English Teacher under the Enhanced NET Scheme in Secondary Schools in my school from ________________ to ________________ (For the contract renewed/appointment contract period extended, the previous appointment/extension contract period was from ________________ to ________________);
   (b) is eligible for reimbursement of medical insurance premium payment at the single / married * rate; and
   (c) have applied / have not applied* for reimbursement of medical insurance premium payment for the ________/_______ school year as specified in paragraph 1 of Part I.

2. The grant of reimbursement of medical insurance premium payment for the period from ________________ to ________________ in the amount of HK$ ________________ (please specify the currency if not in HK Dollars) is approved.

3. I certify that relevant receipts have been sighted by me and are kept in the school for record purpose.

Signature of Supervisor/Principal* ____________________________ Date ____________________________
Name of Supervisor/Principal* Mr/Mrs/Ms/Miss*
Name of School ____________________________
Part IV (To be completed by the NET Administration Team, Education Bureau)

I confirm that (Full Name of the NET) _______________________________ has already established that his/her normal place of residence as outside Hong Kong and he/she is entitled to receive the reimbursement of Medical Insurance Premium in the amount of __________________________ (please specify the currency if not in Hong Kong dollars).

Signature: ________________________________
Name: ________________________________
Post: ________________________________
Date: ________________________________

Part V (To be completed by the Recurrent Subventions Section, Finance Division, Education Bureau)

<table>
<thead>
<tr>
<th>Received on</th>
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</tr>
</thead>
</table>

---- END ----
Enhanced Native-speaking English Teacher (NET) Scheme in Secondary Schools
Application for Advance of Salary

**PART I**

(To be completed by the NET)

To: Supervisor/Principal of ________________________________ (School)

1. I wish to apply for an advance of salary in the amount of HK$ _______________. My basic salary is HK$ _______________ per month.

2. I do hereby abide by the following conditions:
   (a) that I agree to repay the advanced salary by six equal monthly instalments commencing from the month following that in which I receive the advance;
   (b) that all the repayments shall be deducted from my monthly salaries; and
   (c) that if for any reason, my employment ceases with the school, I undertake to pay immediately the sum outstanding which may be deducted by the school from any further sums due to me or to my estate and in the event that the deduction is insufficient to cover the repayment, I will repay the lump sum of the remaining outstanding amount immediately.

3. I confirm that I have read and understood the EDB Circular No. 9/2009 including the Notes for Completing NET-Forms A-E and the stipulations related to advance of salary in the Memorandum on the Terms and Conditions of Service.

Signature of NET

______________________________  Date ____________________

Full Name of NET

______________________________

**Part II**

(To be completed by aided schools / special schools with secondary section only)

To: Secretary for Education
   [Attn: Education Officer (NET Administration)]
   Room 1110, 11/F, Wu Chung House
   213 Queen’s Road East
   Wanchai, Hong Kong

1. I certify that the applicant ________________________________ (Full name) is:
   (i) employed in my school from ________________ to ________________; and
   (ii) on first appointment as a Native-speaking English Teacher under the Enhanced NET Scheme in Secondary Schools.

2. The grant of a salary advance of HK$_______________ is approved. I should be grateful if you would arrange the payment.

3. Please recover the advance by six equal monthly instalments of HK$ ___________ each with effect from ________________ (month/year).

Signature of Supervisor/Principal*

______________________________  Date ____________________

Name of Supervisor/Principal*

______________________________  Mr/Mrs/Ms/Miss*

Name of School

______________________________  (School Code: ___________)

School Address

______________________________  Fax no. ____________________

Contact person for enquiry  Mr/Mrs/Ms/Miss*

______________________________  Tel. no. ____________________

* Delete as appropriate
Part III (To be completed and retained by caput schools)

1. I certify that the applicant ___________________________________________ (Full name) is:
   (i) employed in my school from ____________ to _______________; and
   (ii) on first appointment as a Native-speaking English Teacher under the Enhanced NET Scheme in Secondary Schools.

2. The grant of a salary advance of HK$_______________ is approved.

3. Repayment in six equal monthly instalments of HK$ _________ each should be effected from _______________ (month/year).

Signature of Supervisor/Principal* ___________________________ Date ________________
Name of Supervisor/Principal* Mr/Mrs/Ms/Miss*
Name of School __________________________________________

Part IV (To be completed by Funds Section, Finance Division, Education Bureau)

To: Supervisor/Principal of ________________________________________ (School)

1. The amount of salary advance payment is HK$____________ with the due date on ________________.

2. Repayment will be effected from ______________ in 6 monthly instalments (i.e. ______ equal monthly instalments of HK$_______________ and the last instalment of HK$______________).

Signature ___________________________ Date ________________
Name ___________________________ Designation ___________________________
NOTES FOR COMPLETING NET-FORMS A - E

COLLECTION OF PERSONAL DATA

(a) The personal data provided by means of the forms will be used for processing your application for fringe benefits under the Enhanced Native-speaking English Teacher (NET) Scheme in Secondary Schools.

(b) They may be disclosed to other Government Bureaux & Departments for the purpose mentioned in (a).

(c) The provision of personal data by means of these forms is obligatory. If you do not provide sufficient information, the school and the Education Bureau may not be able to process matters relating to the above-mentioned application.

(d) You have a right of access and correction with respect to personal data as provided for in Sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data provided by these forms.

(e) Enquiries concerning the personal data collected by means of these forms including the making of access and correction should be addressed to your school.