

Information of Applicant			
Name			
Contact telephone number		E-mail address	
Identity document	<input type="checkbox"/> Macau Resident Identity Card <input type="checkbox"/> Teacher's Card* <input type="checkbox"/> Staff Card of Educational Organisation <input type="checkbox"/> Other (please fill in) _____	Number	

Details of educational technical support applied for	
Purpose/Usage	
Beneficial subject	
Remarks	

Information of applicant's belonging organization	
Name of organization	Person in charge

Date _____ / _____ / _____ Signature of person in charge and chop

year month day

For Bureau Use Only	
Recipient and Date	Person in charge

*Identity document issued by Education and Youth Affairs Bureau