

Applicant's Name: \_\_\_\_\_

**HONG KONG SCHOOL DRAMA FESTIVAL 2011/12  
ADJUDICATOR APPLICATION FORM**

**For Office Use**

Date received: \_\_\_\_\_

Accepted /Rejected: \_\_\_\_\_

**IMPORTANT NOTE:**

Please note that this "Adjudication Form" does **NOT** guarantee successful application to the position of drama adjudicator of the captioned Festival, which would depend on administrative concerns, for examples, number of available time slots for school visits, candidate's language preference of school visits, matching of available time slots of both participating schools of the captioned Festival and that of the candidates', etc. **For the new applicants, a group interview will be arranged for selection purpose.**

**Please fill in the form and return it by post (Address: Extended Support Programmes Section, Education Bureau, Rm 5203, 52/F, Hopewell Centre, 183 Queen's Road East, Wan Chai, Hong Kong) or fax to 3107 1306 on or before 13 December 2011.**

**(A) PERSONAL DATA**

Name: \_\_\_\_\_ Mr / Ms/ Miss (ENG) \_\_\_\_\_ (CHI)

Nationality: \_\_\_\_\_ HKID: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

**(B) ADJUDICATION DETAILS** (Please "√" in the appropriate box: )

- I would like to pair up with any successful candidates who will be adjudicators.
- I would like to pair up with \_\_\_\_\_ (suggested partner) as my partner.
- I can serve as an Adjudicator for special school.
- I would not serve as an Adjudicator for special school.

**I. Language Category** (Please "√" for the appropriate boxes. You can choose more than one category.)

School Level	Language of verbal comment						Language of written comment			
Primary	<input type="checkbox"/>	Cantonese	<input type="checkbox"/>	English	<input type="checkbox"/>	Putonghua	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	English
Secondary	<input type="checkbox"/>	Cantonese	<input type="checkbox"/>	English	<input type="checkbox"/>	Putonghua	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	English

**II. School Visit Availability** (Please choose **at least 20 sessions**) (Please "√" the appropriate boxes: )

School Performance Period : 6 February – 2 March 2012 (Monday – Friday)

Time of School Visit : AM ( 9:00am-12:00nn ) ; PM ( 2:00pm-5:00pm )

Date Time	6/2 MON	7/2 TUE	8/2 WED	9/2 THU	10/2 FRI	13/2 MON	14/2 TUE	15/2 WED	16/2 THU	17/2 FRI	20/2 MON	21/2 TUE	22/2 WED	23/2 THU	24/2 FRI	27/2 MON	28/2 TUE	29/2 WED	1/3 THU	2/3 FRI
9am – 12nn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2pm – 5pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**III. Conflict of Interest**

Please list out the school(s) for which you will work as a drama out-reaching tutor or in other relevant works.

School Name (in English)	School Name (in Chinese)

**IV. Brief Biography (within 100 words):**

This information will be distributed to schools concerned for their information prior to your school visits. Please provide the information in Chinese (if you would like to adjudicate school teams of Cantonese and/or Putonghua Category) and/or English (if you would like to adjudicate school teams of English Category) as appropriate.

**V. Matters related to HKSDF**

Have you ever been an adjudicator of HKSDF before?	<input type="checkbox"/> Yes, please indicate no. of year(s) : _____ <input type="checkbox"/> I am able to attend the briefing session in the mid. of Jan. 2012 <input type="checkbox"/> No, please provide your curriculum vitae and 2 Referees for reference Please select the availability for the group interview: <input type="checkbox"/> 15 Dec (Thu) 9am – 1pm <input type="checkbox"/> 16 Dec (Fri) 9am – 1pm
Would you like to be put onto the OUT-REACHING TUTOR LIST, providing drama training to schools participating in the Festival?	<input type="checkbox"/> Yes, please put my name and mobile number on the list <i>(Schools may contact tutors at their own discretion. HKAS is <b>NOT</b> responsible for any transactions between schools and tutors.)</i> <input type="checkbox"/> No, please don't put my information on the list
Would you like to expose your mobile phone number to the school teachers during the Festival?	<input type="checkbox"/> I have no objection to disclose my mobile phone no. <input type="checkbox"/> I don't want to disclose my mobile phone no.

**(C) DECLARATION**

I certify that the information I given above is correct and complete to the best of my knowledge. I commit that I will be available on all the selected time slots for school visits during the School Performance Phase of Hong Kong School Drama Festival. I understand that if I knowingly supply false information, the Education Bureau (EDB) or its official representative shall have the right to rescind any verbal / written offer of appointment and I shall render myself liable to dismissal if I am eventually appointed by the EDB.

Date : \_\_\_\_\_

Signature : \_\_\_\_\_