

# **Hong Kong Cantonese Articulation Test**

# 香港粵語發音測試

# Registration form for Eligible User of Hong Kong Cantonese Articulation Test (HKCAT)

(for local graduates/users practicing in Hong Kong)

## **Notes for Registered Users**

The Hong Kong Cantonese Articulation Test (HKCAT) is designed for use by qualified speech therapists with relevant training on the use of speech and language assessment tools, and in the understanding of child development and its deviations and disorders. The HKCAT is sold at HK\$220 per set. Only those with required qualifications are eligible to be registered users and to purchase and use HKCAT.

### Eligibility

Eligible users of HKCAT are:

- (I) Speech therapists graduated from local universities\* **or** speech therapists graduated from overseas universities\*; and
- (II) Registrant of the Hong Kong Institute of Speech Therapists or Full Member/ Oversea Member of the Hong Kong Association of Speech Therapists; and
- (III) Fluent Cantonese speakers, able to read and write in Chinese, and have general linguistic knowledge of Cantonese.
  - \* Holder of a bachelor's degree or a master's degree in Speech Therapy

# **Application Procedures**

Applicants should submit the duly completed registration form, together with relevant supporting documents including credentials and certificates, to Executive Officer (Child Assessment Service) at:

Central Kowloon Child Assessment Centre,

2/F, 147L Argyle Street, Kowloon City, Kowloon

## **Statement of Purposes**

#### **Purpose of Collection**

The personal data provided is used for vetting of applicant's eligibility to use HKCAT and other related purposes. Your provision of all the personal data requested in this form is voluntary. If you do not provide sufficient information, we may not be able to process/consider your application.

### **Classes of Transferees**

The personal data you provided is mainly for use within Department of Health but they may also be disclosed to other Government bureaux/departments, relevant parties, persons or organisations for the above purposes. Apart from this, the data may only be disclosed to parties where you have given consent to such disclosure or where such disclosure is allowed under the Personal Data (Privacy) Ordinance. Personal data on an unsuccessful applicant will normally be destroyed 24 months after rejection of the application.

#### **Access to Personal Data**

You have the right of access and correction with respect to your 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. A fee may be imposed for complying with a data access request.

#### **Enquiries**

Enquiries concerning personal data provided, including the making of access and corrections, should be addressed to:

Consultant Paediatrician Child Assessment Service 2/F, 147L Argyle Street Kowloon City, Kowloon

Telephone No.: 2246 6659

# (I)Personal Particulars of Registered User:

Date

Name : _		姓	名:	Sex : M / F	
HKID (with first f	our digits)	:xxx(x	)		
Institution grant	ing Speech Thera	pist status :			
-		e of Speech Therapists iation of Speech Therap			
Current work or	ganisation	:			
Current position	/job title	:			
Office address		:		_	
Correspondence (if different fron		:			
Contact phone r	umber :		E-mail address :		
HKCAT registere	d user no.	: (for official use)			
Serial no. of the	HKCAT received (	if applicable) :	(for official use)		
-	-	by Registered User:			
hereby declare t					
•	ars given in Part I are	e true and correct;  Copyright Ordinance will	he strictly observed:		
			d will not be disclosed to any third party;		
		ot be made available for us			
5. if my user e	ligibility application		play my name, work title and discipline a	t the website of the	
6. I understand	d that the Child Asse	•	partment of Health reserves the right to o	determine the	
7. I understand that the Intellectual Property Management Team of the Child Assessment Service of the Department of Health (the "Team") has the authority to review the registration status, which could be subject to suspension or revocation of registered user on a need basis. The team reserves the right to grant, suspend, revoke or reject registration at its sole and absolute discretion;					
the informa	tion provided. I her		ake any enquiry for purposes in relation to the departments and other organisations/ and departments and other organisations of the departments and other organisations of the departments and other organisations of the department		
bodies for i	9. I agree that any breach of this declaration may be referred to relevant professional institutions, organisations or bodies for investigation, inquiry or disciplinary action and the Department of Health reserves the right to take any legal action for such breach.				
Signature o	f Registered User	·			
Name of Re	gistered User (in	block letters) :			