RESTRICTED
(When entered with data)

Department of Health Child Assessment Service
Application Form for Change of Address / Contact Phone Number / Case Transfer to Child Assessment Centre

CAC NO.: * _____ Name of Child: * _____

I, * _____, the ◉ father / ◯ mother / ◯ others **(please specify):** _____ of the above child,

of the above-named child, hereby apply to the Department of Health Child Assessment Service for the following matter(s):

Part A: Application Details

☐ **Change of address**
(Please complete Part B. Proof of address is required.)

☐ **Change of contact phone number**
(Please complete Part B.)

☐ **Transfer to residential catchment Child Assessment Centre for follow-up**
Please provide current address for verification (provide proof of address if any change of address):

_____

Part B: Update of Contact Details (If applicable; fill in updated items only)

Address: _____

Hong Kong Daytime Contact Phone No.: _____
(◉ Home ／ ◯ Mother's Mobile ／ ◯ Mother's Office ／ ◯ Father's Mobile ／
◯ Father's officer ／ ◯ Guardian ／ ◯ Others: _____)

Please tick "✔" the appropriate box(es).

Remarks:

1. Please submit the completed form by fax, by post, in person to any Child Assessment Centre, or upload via "GovHK".
2. For change of address, valid proof of address (original or copy) must be submitted via fax, post, in person, or GovHK. Submitted postal documents will not be returned.
3. The Child Assessment Service of the Department of Health requires **4 to 6 weeks** to process applications for transfer of centre. Written confirmation will be issued by the Centre upon completion of the procedures.

Name of Centre	**Fax number**	**Address**
Siu Sai Wan Child Assessment Centre	2209 4385	7/F and 8/F, Siu Sai Wan Health Integrated Building, 11 Harmony Road, Siu Sai Wan, Hong Kong
Central Kowloon Child Assessment Centre	2715 3447	2/F, 147L Argyle Street, Kowloon City, Kowloon
Pamela Youde Child Assessment Centre (Kwun Tong)	2727 8479	3/F, 79 Cha Kwo Ling Road, Kwun Tong, Kowloon
Fanling Child Assessment Centre	2671 2797	4/F, Fanling Health Centre, 2 Pik Fung Road, Fanling, N.T.
Ha Kwai Chung Child Assessment Centre	2744 8579	2/F, Ha Kwai Chung Polyclinic & Special Education Services Centre, 77 Lai Cho Road, Kwai Chung, N.T.
Pamela Youde Child Assessment Centre (Sha Tin)	2646 6327	2/F, 31-33 Chap Wai Kon Street, Sha Tin, N.T.
Tuen Mun Child Assessment Centre	2462 4962	G/F, Special block, Tuen Mun Hospital, Tsing Chung Koon Road, Tuen Mun, N.T.

Signature of Applicant: _____

Date: * _____

For Staff Only
Signature of Staff: _____
Name of staff: _____
Date: _____