Good MPF Employer Award 2018-19



Nomination Form for Employees

Part A Employee Details						
Title	Dr Mr Ms Miss Mrs					
Name	English:					
	Chinese:					
Email Address						
Correspondence Address						
Day-time Contact No.						
Part B Nominated Emplo	oyer Details					
Name	English:					
	Chinese:					
Contact Person						
Position						
Telephone No.						
Email						
Part C Note to Employee						
 Upon receipt of the nomination, the MPFA will contact your employer to confirm their interest in the Award. Your employer will need to fill in an application form if they wish to apply for the Award. You agree that the MPFA can disclose your name to your employer. 						

• If your employer is granted the Award, you will receive a souvenir from the MPFA as a token of appreciation.

Name of Signatory	Signatura	
Date	Signature	

Personal Information Collection Statement: Personal data supplied in this Form will only be used for the purpose of processing your nomination for the Good MPF Employer Award. The MPFA will not disclose or transfer your personal data to third parties without your consent. You have the right to request access and to amend your personal data held by the MPFA. If you want to access or amend your personal data held by the MPFA, send your request by post to the Personal Data Privacy Officer, Mandatory Provident Fund Schemes Authority, Level 8, Tower 1, Kowloon Commerce Centre, 51 Kwai Cheong Road, Kwai Chung, New Territories, Hong Kong. Please complete the Data Access Request Form (OPS003) before making the request to access information.

GMEA-NF 1901

Submission	Fax 2259 8353	Email goodMPFemployer@mpfa.org.hk	Post	External Affairs Division, MPFA, Level 8, Tower 1, Kowloon Commerce Centre 51 Kwai Cheong Road, Kwai Chung
------------	---------------	-----------------------------------	------	------------------------------------------------------------------------------------------------------------------