T To : Hong Kong Securities and Investment (HKSI) Institute

17/F, Cambridge House, Taikoo Place, 979 King's Road, Quarry Bay, Hong Kong

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| **Student Internship Programme (“SIP”)**  **Asset and Wealth Management Sector** |

**SUBSIDY CLAIM FORM**

|  |  |  |
| --- | --- | --- |
| Name of Participating Employer | (Chinese) |  |
| (English) |  |

Our company wishes to claim the subsidy from the Pilot Programme to Enhance Talent Training for the Asset and Wealth Management Sector on the monthly honorarium paid to the intern(s) recruited under “Student Internship Programme – Asset and Wealth Management Sector”. Relevant details of the intern(s) are listed on the following page(s). We confirm that the details and information provided in this form and all the supporting documents[[1]](#footnote-1) for the respective intern(s) are true and correct. We declare that we have not received and will not apply for any form of subsidy from any other funding schemes in respect of the honorarium paid to these intern(s).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | |  |  | |
| Original signature of Authorised Person | | |
|  | |  |
| Name of Authorised Person  For and on behalf of the Company | | | Company Chop | |
|  | | |  | |
| Position |  |  | Date |  |
|  |  |  |  |  |
| Telephone |  |  | Email |  |

|  |  |
| --- | --- |
|  | *Note : The subsidy will be made by cheque payment in the name of the Participating Employer (“PE”) as stated above, or the hiring company from the same group company provided at the time of PE application,* |
|  | *Name of hiring firm (if applicable):* |
|  |

**SIP SUBSIDY CLAIM FORM**

*(cont’d)*

|  |  |
| --- | --- |
| Number of Intern(s) eligible for subsidy claim[[2]](#footnote-2) |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. | Name of Intern |  | | |
| Internship Period  (in accordance with the employment contract) | | From | To |
| Total Honorarium Paid |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 2. | Name of Intern |  | | |
| Internship Period  (in accordance with the employment contract) | | From | To |
| Total Honorarium Paid |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 3. | Name of Intern |  | | |
| Internship Period  (in accordance with the employment contract) | | From | To |
| Total Honorarium Paid |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 4. | Name of Intern |  | | |
| Internship Period  (in accordance with the employment contract) | | From | To |
| Total Honorarium Paid |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 5. | Name of Intern |  | | |
| Internship Period  (in accordance with the employment contract) | | From | To |
| Total Honorarium Paid |  | | |

**SIP SUBSIDY CLAIM FORM**

*(cont’d)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 6. | Name of Intern |  | | |
| Internship Period  (in accordance with the employment contract) | | From | To |
| Total Honorarium Paid |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 7. | Name of Intern |  | | |
| Internship Period  (in accordance with the employment contract) | | From | To |
| Total Honorarium Paid |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 8. | Name of Intern |  | | |
| Internship Period  (in accordance with the employment contract) | | From | To |
| Total Honorarium Paid |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 9. | Name of Intern |  | | |
| Internship Period  (in accordance with the employment contract) | | From | To |
| Total Honorarium Paid |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 10. | Name of Intern |  | | |
| Internship Period  (in accordance with the employment contract) | | From | To |
| Total Honorarium Paid |  | | |

**SIP SUBSIDY CLAIM FORM**

*(cont’d)*

***Checklist for Supporting Documents***

Please ensure you have attached the following supporting documents in your applications for subsidy:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Supporting Document to be provided** | **Yes**  **(ü)** | **No**  **(ü)** | **Reasons for “No”** |
| 1. | Supporting documents to prove interns are eligible full-time undergraduates or postgraduates of the 22 accredited degree-awarding Higher Education Institutions, such as valid student card, the latest transcripts (within 3 months prior to the date of contract) or any other official documents issued by HEIs showing the year and program that the intern is studying. |  |  |  |
| 2. | Copies of “Approval Letter” or “No Objection Letter” issued by the Immigration Department, and/ or endorsement letters from HEIs to confirm the students are lawfully employable in the HKSAR if they are holding student visas. |  |  |  |
| 3. | Acknowledgement of receipt of the honorarium by intern(s)  (Please use template provided in this pack if your company do not have one.) |  |  |  |
| 4. | Attendance record(s) signed by Supervisor and Intern(s) with Company Stamp or any other equivalent payment proof  (Please use template provided if your company do not have one.) |  |  |  |
| 5. | Copies of employment contract(s) of intern(s)  (Please refer to the “Checklist for Employment Contract” downloadable from our website.) |  |  |  |
| 6. | Completed performance assessment(s) on intern(s)  (Please use prescribed form prepared by Hong Kong Securities and Investment Institute in this pack.) |  |  |  |

End -

**Student Internship Programme**

**Asset and Wealth Management Sector**

**Receipt Acknowledgment of Honorarium by Intern**

I, (*name of intern*) \_\_, was employed as an intern at \_\_\_\_*(name of Participating Employer)\_\_ \_*  from \_\_\_\_(dd/mm/yyyy)\_\_\_\_\_\_\_ to \_\_\_(dd/mm/yyyy)\_\_\_\_\_\_\_\_\_.

\* Please specify the hiring company if the contract is not signed with the Participating Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby acknowledge receipt of my honorarium with breakdown as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| Period | | Honorarium[[3]](#footnote-3)  (Amount Received)  HK$ | Payment by Participating Employer or Hiring Company via |
| From | To | Cheque/Autopay/Cash |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total: | |  |  |

q Please check (þ) the box if MPF Scheme has been enrolled in by the Participating Employer for internship longer than 59 calendar days.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Original signature of Intern |  | Date |

**Student Internship Programme**

**Asset and Wealth Management Sector**

**Attendance Record of Intern**

|  |  |  |
| --- | --- | --- |
| Name of Participating Employer (“PE”) |  | |
|  |  | |
| Name of Intern & Position Title | | Name of Supervisor & Position Title |
|  | |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date  (dd/mm/yy) | Weekday | Start Time | End Time | Meal  Break  (No. of hrs) | Actual  Work  Hours[[4]](#footnote-4) | Please þ if working from home[[5]](#footnote-5) |
|  | Mon |  |  |  |  |  |
|  | Tue |  |  |  |  |  |
|  | Wed |  |  |  |  |  |
|  | Thu |  |  |  |  |  |
|  | Fri |  |  |  |  |  |
|  | Sat |  |  |  |  |  |
|  | Sun |  |  |  |  |  |
|  | Mon |  |  |  |  |  |
|  | Tue |  |  |  |  |  |
|  | Wed |  |  |  |  |  |
|  | Thu |  |  |  |  |  |
|  | Fri |  |  |  |  |  |
|  | Sat |  |  |  |  |  |
|  | Sun |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Signature of Supervisor with Company Chop |  | Signature of Intern |  | Date |

**Student Internship Programme**

**Performance Assessment on Intern**

This performance assessment should be completed by the supervisor of the intern. The supervisor must discuss it with the intern to enable the latter to benefit from constructive feedback on his/her internship performance.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Information on Intern | | | | | | | |
| Name as printed on HKID card | | | e.g. Chan Tai Man | | | | |
| HEI |  | | | | | Year of Study |  |
| Position Title |  | | | | | | |
| Name of Participating Employer | | |  | | | | |
| Internship Duration | | from | |  | to |  | |

|  |  |
| --- | --- |
| Information on Supervisor | |
| Name |  |
| Position Title |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Assessment |  | Date of Discussion |  |
|  | |  | |
| Original signature of Supervisor | | Original signature of Intern | |

|  |
| --- |
| Comments from Intern (*if any*) |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Original signature of Authorised Person  For and on behalf of the Company |  | Company Chop |  | Date |

**Performance Assessment on Intern** (cont’d)

Please rate (þ) the intern’s performance using the scale below. Rate N/A for not applicable or not enough information to form a judgement.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** |
| Far below expectations | Below expectations | Met expectations | Above expectations | Far above expectations |

| **Assessment Criteria** | **1** | **2** | **3** | **4** | **5** | **N/A** |
| --- | --- | --- | --- | --- | --- | --- |
| **Work Habits/Conduct** | | | | | | |
| * Arrived punctually consistently and remained in office during working hours |  |  |  |  |  |  |
| * Informed supervisor if a specific commitment cannot be kept (e.g. absence/late for work, missed deadlines) and took the initiative to re-arrange work schedule |  |  |  |  |  |  |
| * Behaved appropriately regarding the norms about clothing, language, and manners at the workplace |  |  |  |  |  |  |
| * Upheld professional/business ethics, exhibited integrity and confidentiality attributes |  |  |  |  |  |  |
| **Work Performance** | | | | | | |
| * Undertook work assignments with enthusiasm |  |  |  |  |  |  |
| * Completed work assignments satisfactorily and timely |  |  |  |  |  |  |
| * Accepted responsibility for mistakes, made needed improvements and learnt from experiences |  |  |  |  |  |  |
| * Demonstrated proficiency in applying academic knowledge and relevant skills (e.g. computational/ technical, verbal/written communication, critical reasoning, analytical, problem solving, innovating skills etc.) to accomplish work assignments |  |  |  |  |  |  |
| * Demonstrated personal character traits (e.g. self-motivation, resourcefulness, adaptability, judgement, assertiveness, etc.) in accomplishing work assignments |  |  |  |  |  |  |
| **Workplace Interaction** | | | | | | |
| * Showed respect to supervisor and actively sought supervision when necessary |  |  |  |  |  |  |
| * Responded well to constructive criticism |  |  |  |  |  |  |
| * Worked collaboratively with team members and fellow co-workers with a positive attitude |  |  |  |  |  |  |
| **Overall Performance** |  |  |  |  |  |  |

|  |
| --- |
| **Additional Comments if any**  *(e.g. What did the intern do exceptionally well? What areas could he/she improve on?)* |

1. Supporting documents refer to

   (a) payment proof and receipt acknowledgement of the honorarium by intern(s);

   (b) attendance record(s) of intern(s);

   (c) copies of employment contract(s) of intern(s);

   (d) completed performance assessment(s) on intern(s) (with prescribed form prepared by Hong Kong Securities and Investment Institute)

   *Updated in November 2023* [↑](#footnote-ref-1)
2. Please add extra paper if the number of student claims is more than 10. [↑](#footnote-ref-2)
3. Please add back the MPF deduction (employee’s portion), if any, to show the full amount of honorarium paid to the intern. [↑](#footnote-ref-3)
4. Meal break (paid or unpaid) are excluded from actual work hours. [↑](#footnote-ref-4)
5. Work from home arrangement is set at maximum ONE day per week. [↑](#footnote-ref-5)