

**Application Form**

X-Ray Screening Refresher Training  
for Regulated Air Cargo Screening Facility (RACSF)

<b><u>Section 1 – Particulars of RACSF</u></b>		
(i) Company Name		
(ii) RACSF Code		
(iii) Site Address of RACSF		
(iv) Name of Nominated Person		
(v) Contact Details of Nominated Person	(Phone)	(Email)
(vi) Details of X-ray equipment	(Make and Model)	<input type="checkbox"/> Equipment has been approved for use <input type="checkbox"/> To be approved for use _____ <span style="float: right;">(dd/mm/yyyy)</span>
<b><u>Section 2 – Particulars of Applicant</u></b>		
(i) Full Name	(English)	(as appeared on HKID/passport)
	(Chinese)	(as appeared on HKID/passport)
(ii) Contact Details	(Mobile)	(Email)
(iii) Company Name and Address <i>(if it is different from Section 1 (i))</i>		
(iv) Position in Company		
(v) Date of Training Course	(dd/mm/yyyy)	
(vi) Completion Date of Previous Training Course <i>(please provide a copy of certificate for reference)</i>	(dd/mm/yyyy)	

RACSF shall ensure that all the information in this application form is true and correct.

Signature of Nominated Person	Company chop
Name of Nominated Person	Date