



APPEAL APPLICATION FORM



Program Name : (delete as appropriate)	BEAM Professionals Training and Examination New Buildings (NB) / Existing Buildings (EB) / Interiors (BI) / Neighbourhood (ND) BEAM Affiliate Training and Examination					Date of Submission: (DD/MM/YY)
Name : (Name shown on your HKID / Passport)	Dr / Ir / Prof / Mr / I	Mrs / Ms				
Contact Phone No:	Email Address:					
Organisation :						
Job Title :						
Date of Training Session Attended:		Examination	n Date:		Se	at No.:
		Session Take	ən:	Time:		
Form(s) of Appeal: (choose more than 1 box if applicable)	Appeal to Proce		dure			

Reasons for Appeal:

(Please elaborate in more details with evidence if possible. You can also attach relevant documents as additional information.)

Notes to Applicants:

- 1. Appeals must be made within 10 working days immediately following the announcement of results.
- 2. Application must be submitted together with payment by cheque.
- 3. An official receipt will be issued shortly upon cheque clearance.
- 4. You will be informed of the result of your appeal by around 30 working days after appeal submission.

PAYMENT

Fee: HK\$500.00 (Administration Fee) + _____x HK\$500.00 (Questions to be appealed – if available) = HK\$_____ Please send a crossed cheque made payable to "BEAM Society Limited" together with this Appeal Form to: 1/F, Jockey Club Environmental Building, 77 Tat Chee Avenue, Kowloon Tong, Hong Kong

Cheque Number and Issued Bank: _

DECLARATION & CONFIDENTIALITY

I hereby declare that I have read the "Notes to Applicants" stated in the above; and this submission will be kept confidential.

Signature of Applicant

Date

All information supplied will be used strictly confidential.

For Office Use Only	Case No:	
Case Received Date:	Case Received by:	
Case Assigned To:	Case Copied To:	
Deadline to Reply to Applicants	Closing Date:	Closed By: (staff)