



LCCI INTERNATIONAL QUALIFICATIONS (ENROLLMENT FORM)

CENTER CODE: MACA1001

Project Code: INP35-03-2008-TR

考生姓名 Name of Candidate (英文姓名/in English):

<考生姓名(請以正楷填寫), 這姓名將會出現在證書上。 Name of Candidate in full (BLOCK LETTERS) as it is to appear on Certificates. >

Grid for candidate name entry

中文姓名: Name in Chinese: _____

性別: Sex: 男M 女F

出生日期: Date of Birth: ____/____/____
日DD 月MM 年YYYY

證件類別: Types of Identification: 居民證 BIR 其他 Other _____

證件號碼: Identification No.: _____

住址 Address: _____

電話 Tel: (家居 Home) _____ (流動電話 Mobile) _____ (短訊通知/ SMS Notification)

電子郵件 Email: _____

請以“√”符號選擇及填寫合適類別 Please mark “√” in the box(es) the appropriate category & complete accordingly

學生 Student 在職 Employed 公司/學校名稱 Company/School Name: _____ 職位 Position: _____

行業分類 Industry: _____ *分類 (參閱第 2 頁/Refer Page 2) 待業 Unemployed 家庭主婦/退休人士/其他 Housewives/Retired Workers/Others

就讀以下考試科目之學校/機構名稱 Institution at which you studied for this examination

~~2019 年 12 月份 (December 2019 Series) 考試時間及費用表 Exam Timetable and Fees ~~

請以“√”符號表示所報科目 Please mark “√” in the box(es) for the subject(s) registered

Table with 7 columns: Level, Subject, PDAC Code, Date, Time, Price. Rows include ASE20093, ASE20104, ASE20097, ASE20098.

共考科目 Total No. of Subjects:

<到達時間 Arrival time: 17:30 >

總金額 Total Amount:

一切費用概不退還及不能轉讓 Fees paid are non-refundable and non-transferable 報名後不能更改考試科目及級別 No change of examination subject and level is allowed once registration has been made

報考人簽名 Candidate's Signature: _____

日期 Date: ____/____/____



Project Code: INP35-03-2008-TR

***行業分類 INDUSTRY CLASSIFICATION**

01	製造業	Manufacturing	09	工程、建築業	Engineering and Construction
02	酒店、旅遊服務業	Hotel and Travel Services	10	醫療、健康護理、社會服務業	Medical Services, Healthcare and Social Services
03	飲食業	Catering	11	銀行、金融服務業	Banking and Financial Services
04	批發、零售、出入口貿易業	Wholesale, Retail, Import & Export Trade	12	運輸、倉儲及物流業	Transport, Warehousing and Logistics
05	不動產、工商服務業	Real Estate, Business Services	13	博彩、娛樂業	Gaming and Entertainment
06	資訊科技、其他科技行業	Information Technology and Other Technologies	14	公共行政部門	Public Sector Departments
07	個人服務(美容、美髮等)	Personal Services (e.g. beauty,, hairdressing etc)	15	非牟利組織、社團、學校	Nonprofit organizations, Associations and Education
08	公用、專營行業(水、電、電訊、交通運輸等)	Public Utilities (e.g. water, electricity, telecom, mass transportation etc)	16	其他	Others

以郵寄或傳真方式報名專用 FOR THE USE OF ENROLLMENT BY MAIL/FAX ONLY

信用卡繳費指示 Credit Card Payment Instruction:	
信用卡類別 Type of Credit Card:	<input type="checkbox"/> Master Card <input type="checkbox"/> Visa
銀行名稱 Bank Name:	
持卡人姓名 Cardholder's Name:	
信用卡號碼 Card Number:	CVC2/CVV2**:
有效日期 Expiry Date:	/ (月/年 MM/YY)
簽帳金額 Amount To Be Charged:	澳門幣 MOP
持卡人簽名 Cardholder's Signature:	

** CVC2/CVV2 是位於信用卡背後、簽名方格內號碼的最後三個數字。
CVC2/CVV2 is the last three digits of the number listed in the signature panel on the back of the card.

注意事項 Please Note :

- 支票須在銀行過數後/信用卡付款須在信用卡中心批核後，報名方可作實。
Enrollment is confirmed only after the cheque has been cleared by the bank or credit card transaction approved by the card center.
- 本中心保留取消考試或更改考試安排的權利，而不須作事前通知。
CPTTM reserves the right to cancel the exam or alter exam arrangements without prior notice.
- 除非是本中心取消考試或更改考試安排，已繳費用概不退還。辦理退款時，請攜同有關收據。
Fee paid is non-refundable, unless the exam has been cancelled or exam arrangement changed by CPTTM. For refund, please bring along the receipt.

此欄由本中心填寫 FOR CPTTM USE ONLY

<input type="checkbox"/> 現金 Cash /POS	<input type="checkbox"/> 發票 Invoice – 編號 No.:	收據編號 Receipt No.:
<input type="checkbox"/> 信用卡 Credit Card	<input type="checkbox"/> 支票 Cheque – 發票人 Issuer:	
經辦人 (RC): Handled by (RC): (Date)	專業考試資源中心覆核: Reviewed by PERU:	備註 Observation:

報名地點 ENROLLMENT LOCATIONS

總辦事處 Head Office	澳門上海街 175 號中華總商會大廈六樓 Rua de Xangai, 175, Ed. ACM, 6th Fl., Macau Tel: (853) 2878 1313 Fax: (853) 2878 8233
成衣技術匯點 House of Apparel Technology	澳門漁翁街海洋工業中心第二期十樓 Rua dos Pescadores, Ed. Ind. Ocean, Fase II, 10 andar, Macau Tel: (853) 8898 0701 Fax: (853) 2831 2079
數碼匯點 Cyber-Lab	澳門馬統領街廠商會大廈三樓 Rua Comandante Mata Oliveira, Ed. Asso. Ind. 3 andar Macau Tel: (853) 8898 0601 Fax: (853) 2837 3085
網址 Website: http://www.cpttm.org.mo/	電子郵件 E-mail: cpttm@cpttm.org.mo

報考人簽名 Candidate's Signature: _____ 日期 Date: / /