初步提案

Preliminary Proposal

1. **提案名稱：**

   Name of proposal:

   _____

2. **初步提案符合的主題：（可選多項）**

   Theme(s) covered in the proposal: (multiple selections allowed)

   (1) 加強公眾及社區各持份者對照顧者身份的認識、識別及支持

   Enhance public awareness on the carer identity, promote identification of carers in need, and encourage community support for carers

   (2) 促進照顧者的資訊交流、同路人互助及情緒支援，加強照顧能力

   Promote information sharing and mutual support among carers so as to enhance carers' capacity

   (3) 創造社區喘息服務的可能性

   Develop community-based respite service initiatives

3. 提案針對的目標照顧者：（可選多項）

   Targeted carers: (multiple selections allowed)

   (1) 護老者 (跳至第 5 題)

       Carers for the elderly (skip to Q5)

   (3) 兒童的照顧者 (跳至第 5 題)

       Carers for children (skip to Q5)

   (2) 殘疾人士的照顧者

       Carers for persons with disabilities

   (4) 長期病患者的照顧者

       (跳至第 5 題)

       Carers for persons with chronic

       illness(es) (skip to Q5)

4. 被照顧的殘疾人士之殘疾類別為：（可選多項）

   （殘疾人士是指任何人士有以下情況，並已持續或預料會持續最少 6 個月的時間，或經認可的醫務人員（例如西醫及中醫）診斷有以下情況中至少一項。）

   The care-recipient suffers from the following type(s) of disability: (multiple selections allowed)

   ("Persons with disabilities" were defined as those who had perceived themselves as having one or more of the following conditions which had lasted, or were likely to last, for a period of 6 months or more; or had been diagnosed by qualified health personnel (such as practitioners of Western medicine and Chinese medicine) as having one or more of the following conditions.)

   (1) 肢體傷殘 Physical disability

   (3) 聽障 Hearing impairment

   (5) 精神病 Mental illness

   (7) 特殊學習困難

       Specific Learning Difficulties

   (9) 智障 Intellectual Disability

   (2) 視障 Visual impairment

   (4) 言語障礙 Speech impairment

   (6) 自閉症 Autism

   (8) 注意力不足 / 過度活躍症

       Attention Deficit / Hyperactivity

       Disorder

   (10) 器官殘障 Visceral disability

5.　請簡單描述目標照顧者的特點。（例如在職照顧者、新手照顧者、雙老照顧者等）

Explain the feature(s) of your targeted carers. (E.g. working carers, freshman carers, elderly carers, etc.)

_____

6. 初步提案內容：（約 500 字）

Details of your preliminary proposal: (around 500 words)

7. 提案期望獲得的支援：（約 100-300 字）

（例如專業人士支援、計劃成效評估、串連合作夥伴等）

Support(s) you wish to receive for executing your proposal: (around 100-300 words)

(E.g. professional assistance, social impact assessment, connections for partnership, etc.)

8. 團隊成員資料：

Information of team members:

	姓名 Name	機構# Organisation#	職稱／身分（例如照顧者） Position / Identity (E.g. carer)	聯絡電話 Contact No.	電郵 Email
主要申請人* Main Applicant*					
成員 1 Team Member 1					
成員 2 Team Member 2					
成員 3 Team Member 3					
成員 4 Team Member 4					
成員 5 Team Member 5					

* 主要申請人亦即團隊聯絡人。The Main Applicant is also the contact person of the team.

\# 主要申請人的所屬機構需為：

The main applicant of the team must belong to one of the following types of organisation:

i.　根據《稅務條例》（第 112 章)第 88 條獲豁免繳稅的慈善機構；或

　　Charitable institutions of a public character, which are exempt from tax under section 88 of the Inland Revenue Ordinance; OR

ii.　列於社企指南內的社會企業；或

　　Social enterprises included in SE Directory; OR

iii.　獲社署提供有時限、以兩年為一期的「殘疾人士／病人自助組織資助計劃(2020-2022)」撥款資助之殘疾人士／病人自助組織

　　Self-help Organisations of Persons with Disabilities / Chronic Illnesses received SWD funding support under a 2-year time-defined "Financial Support Scheme for Self-help

　　Organisations of Persons with Disabilities / Chronic Illnesses (2020-2022)"

團隊成員所屬機構則不限。Other team members could belong to any organisations registered under Hong Kong's Societies Ordinance.

9. 聲明及承諾：（請剔選）

Declaration and Commitment: (Please check the appropriate boxes)

本團隊承諾在入選後全程參與工作坊，及於通過最終評審後，將於行動項目階段訂明的期限內執行計劃。

Our team commit to participate in all 4 sessions of workshops throughout the selection process, and implement the modified proposal at the Action Project stage within the specified project period if passed the final selection.

本團隊已細閱申請指引，明白及接納計劃細則及要求。

Our team understand and accept the conditions and requirements as stated in the application guideline.

- 表格完 End of Form -