eHR Service Provider (SP) Training Scheme Application Form

Application for eHR SP training scheme can be submitted throughout the year. Form A is suitable for IT Vendor whereas Form B is for Private Healthcare Provider.

The Application Form can be downloaded from the eHealth website (https://www.ehealth.gov.hk/en/index.html).

Submission of Application Form:

Applicants should submit the completed application form by post, facsimile or electronic mail to eHRO.

Finance and Project Management Unit,

Electronic Health Record Office,

Health Bureau,

Unit 1103, 11/F, Harbourside HQ, 8 Lam Chak Street,

Kowloon Bay, Hong Kong

[Attn: EO(H)6B]

Fax: (852) 3586 0445

Email: enquiry@ehealth.gov.hk

For all application, applicants should also provide a copy of the Business Registration Certificate and/or the Certificate of Incorporation (of the IT vendor or the private healthcare provider).

Form B – For Private Healthcare Provider

A. Healthcare Provider (HCP) Details				
1.	HCP Name			
2.	Business Registration Number			
3.	HCP Address			
4.	HCP Website			
5. Person Applying for Training				
	Name and Position			
	Tel No. (Office)		Tel No. (Mobile)	
	Fax			
	Email Address			
B. Declaration of Information				
THE UNDERSIGNED (FULL NAME) CERTIFY THAT THE INFORMATION FURNISHED ON THIS APPLICATION FORM IS TRUE AND CORRECT.				
Name of Person Applying for Training Date				
Signature of Authorised Person of Healthcare Company Chop Provider				

Note

The purpose of collecting company and personal data by the Electronic Health Record Office of the Health Bureau of HKSARG is to process the application under the eHR Service Provider Training Scheme and to carry out subsequent follow-up work only.