



禁毒基金二零二五年度一般撥款計劃 Beat Drugs Fund 2025 Funding Exercise Regular Funding Scheme

申請表 APPLICATION FORM

申請表填寫指引 Guidelines on Completing the Application Form

- 第 1 頁「申請機構／人名稱」、「項目名稱」及「項目撮要」部分必須以中文和英文填寫。
Please complete the sections of “Name of Applicant Organisation/Applicant”, “Project Title” and “Project Summary” on page 1 in BOTH Chinese and English.
- 至於本申請表其他部分，請選擇以中文或英文填寫。
Please complete other parts of this application form in EITHER Chinese OR English.
- 有關遞交本申請表的指引，請參閱 D 部。
For submission guidelines of this application form, please refer to Part D.

申請機構／人名稱 Name of Applicant Organisation/Applicant	
1. 中文 Chinese:	
英文 English:	
項目名稱 Project Title	
2. 中文 Chinese:	
英文 English:	
項目撮要 (中英文各不多於500字。) Project Summary (Maximum 500 words for each language.)	
請參考保安局禁毒處網頁(https://www.nd.gov.hk/tc/beat_drug_fund_2025.html)提供的例子及指引。 Please refer to the examples and Guidance Notes available on the website of the Narcotics Division, Security Bureau (https://www.nd.gov.hk/en/beat_drug_fund_2025.html).	
3. 中文 Chinese:	
(____ 字)	
英文 English:	
(____ words)	
本年度申請機構／人所有申請項目資料‡ Details of all applications submitted by the Applicant Organisation/Applicant for this year‡	
項目名稱 Name of Project(s) :	

‡:如在本年度提出多於一項申請，請列出各個項目的名稱。申請機構／人無須為申請排列優先次序。如申請機構屬母機構轄下的分會／分區組織或專上學院部門包括其教職員，此欄應由母機構／學院院長填寫。

For Applicant Organisation/Applicant who **submits more than one application** in this funding exercise, please list out the project name for all applications. Applicant Organisation/Applicant is not required to prioritise the listed applications. If the Applicant Organisation is a branch/district organisation under a parent organisation or department, including faculty member of a post-secondary institution, this item should be completed by the parent organisation/dean of faculty of the post-secondary institution concerned.

A 部 Part A 項目資料 Project information

I. 項目種類 Project type		
4. <input type="checkbox"/> 項目延續 Continuation of project (現時之項目檔號 Existing project. no:) <input type="checkbox"/> 新申請項目 New project		
II. 申請書類別 Category of proposal		
5. 項目的主要性質 (只選一項) @ Primary nature of the project (choose one only) @ <input type="checkbox"/> 預防教育和宣傳 Preventive Education & Publicity <input type="checkbox"/> 戒毒治療和康復 Treatment & Rehabilitation <input type="checkbox"/> 研究 Research	6. 項目的次要性質 (如適用; 可選多項) @ Secondary nature of the project (if applicable; choose all that apply) @ <input type="checkbox"/> 預防教育和宣傳 Preventive Education & Publicity <input type="checkbox"/> 戒毒治療和康復 Treatment & Rehabilitation <input type="checkbox"/> 研究 Research	
@ 若申請的主要或次要性質包含 – (i) 「預防教育和宣傳」或「戒毒治療和康復」, 申請機構/人必須填寫附錄 A; (ii) 「研究」, 申請機構/人必須填寫附錄 B。 The Applicant Organisation/Applicant must complete – (i) Appendix A if the primary or secondary nature of the project is “Preventive Education & Publicity” or “Treatment & Rehabilitation”; (ii) Appendix B if the primary or secondary nature of the project is “Research”.		
III. 受惠地區 District(s) to be benefited (可選多項 Choose all that apply)		
7. <input type="checkbox"/> 全港性 Territory-wide <input type="checkbox"/> 地區性, 請註明地區 District-based, please specify:		
IV. 建議推行日期: Proposed date of implementation:	8. 由 / (月 month) (年 year)	9. 至 / (月 month) (年 year)
V. 推行年期: Project duration:	10. 年 year(s) 月 month(s)	

B部 Part B 申請機構／人資料 Applicant Organisation's/Applicant's information

I. 申請機構／人 Applicant Organisation/Applicant					
11. 地址 Address				12. 電話號碼 Tel no.	
13. 電郵地址 Email address					
14. 網頁及社交媒體（例如Facebook, Instagram, YouTube）（如有）的連結 Link(s) of website(s) and social media platform(s) (such as Facebook, Instagram, YouTube) (if any)					
申請機構／人的 <u>主要</u> 網頁及／或社交媒體連結（每平台最多一個） Link(s) of major website(s) and/or social media platform(s) (maximum one for each platform) of Applicant Organisation/Applicant					
申請機構／人 <u>最近為</u> 執行禁毒基金撥款計劃下的項目或為推行其他禁毒工作而開設的網頁及／或社交媒體的連結（最多四個項目） Link(s) of website(s) and/or social media platform(s) relating to the most recent projects funded by the Beat Drugs Fund or other anti-drug work carried out by the Applicant Organisation/Applicant (maximum four projects).					
主管姓名（如行政總監、總幹事等） Name of officer in-charge (i.e. Chief Executive, Director, etc.)					
15. 姓名 Name		16. 職銜 Post		17. 香港身份證號碼 HKID No.	
18. 電話號碼 Tel No.		19. 手提電話號碼 Mobile Phone No		20. 電郵地址 Email Address	

II. 項目負責人／首席研究員資料（此人員須同時為項目聯絡人） Information of Project Leader/Principal Investigator (This person must also be the Project Contact Person)					
21. 姓名 Name		22. 職銜 Post		23. 香港身份證號碼 HKID No.	
24. 地址 Address				25. 電話號碼 Tel No.	
				26. 手提電話號碼 Mobile Phone No.	
27. 電郵地址 Email Address					

III. 申請機構／人背景 Background information of Applicant Organisation/Applicant			
(a) 如屬機構，請註明 For Applicant Organisation, please state –			
28. 機構根據下列條例註冊 * The Applicant Organisation is registered under *		29. 註冊年份 Year of Registration	
* 註冊條例: (a) 《社團條例》; (b) 《公司條例》; (c) 其他 (請註明) * Ordinance: (a) Societies Ordinance; (b) Companies Ordinance ; (c) Others (please specify)			
30. 是否《稅務條例》第88條所指的慈善機構 – Whether the Applicant Organisation is a charitable organisation for the purpose of section 88 of the Inland Revenue Ordinance –	<input type="checkbox"/> 是 (請提供稅務局發出的IR表格第302號) Yes (please provide Form 302 issued by the Inland Revenue Department) <input type="checkbox"/> 否 No		
31. 是否社會福利署資助服務機構 – Whether the Applicant is an organisation subvented by the Social Welfare Department –	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No		
(b) 如屬個人，請提供附屬機構支持項目的證明文件。 For individual Applicant, please attach documentary evidence showing that support from affiliated organisations has been obtained.			

IV. 申請機構／人（及附屬機構）背景（以中文或英文不多於300字填寫）（如A部(II)填寫的主要或次要性質包含「研究」，請提供申請院校／機構的資料。） Background of the Applicant Organisation/Applicant (and the affiliated organisation) (in no more than 300 words, either in Chinese or English) (For “Research” as primary or secondary nature marked in Part A(II), please provide the information of Applicant Institution/Organisation.) 例如宗旨、歷史、經費來源、主要從事的業務或服務、其他與項目有關的特點或專業背景等 Such as mission, history, source of income, core activities, any unique features or relevant expertise
32.

V. 申請禁毒基金一般撥款計劃的紀錄 Record of Beat Drugs Fund Regular Funding Scheme application			
請列出以往四年內申請機構／人曾申請之項目名稱（不論成功與否） Please list the project title(s) of previous application(s) applied by the Applicant Organisation/Applicant under the Beat Drugs Fund Regular Funding Scheme in the past four years (whether successful or not)			
33. 申請年份（請最先列出最近年份的項目） Year of application (please list the more recent project first)	34. 申請項目名稱 Project title in application	35. 核准項目編號（如適用） Approved project number (if applicable)	36. 申請結果 Application results
e.g. 2022一般撥款計劃	禁毒起動計劃	BDF220099	<input checked="" type="checkbox"/> 核准 / Approved <input type="checkbox"/> 不獲核准 / Rejected
e.g. 2021 Regular Funding Scheme	Anti-drug Power Project	N/A	<input type="checkbox"/> 核准 / Approved <input checked="" type="checkbox"/> 不獲核准 / Rejected
			<input type="checkbox"/> 核准 / Approved <input type="checkbox"/> 不獲核准 / Rejected

VI. 申請機構／人從事其他禁毒工作的經驗（除禁毒基金一般撥款計劃項目外） Applicant Organisation's/Applicant's other experience in anti-drug cause (other than projects funded under Beat Drugs Fund Regular Funding Scheme) 請列出以往四年內的相關項目（最多五項） Please list relevant activities in the past four years (maximum 5 items)			
37. 推行日期（請最先列出最近年份的項目） Implementation period (please list the more recent project first)	38. 項目名稱及活動簡介 Project name and summary of activities	39. 資助機構及計劃名稱（如適用） Funding organisation and name of scheme (if applicable)	40. 受惠社群 Beneficiary group
e.g. 1/9/2023 – 31/8/2024	XXX中學校園禁毒計劃	禁毒基金含測檢元素的校園計劃	XXX中學學生
e.g. 1/9/2022 – 31/8/2023	Anti-drug Scheme for Hong Kong's Working Adults	Association for Youth	Working population aged between 25-34 in Hong Kong

VII. 戒毒治療和康復中心入住情況（如適用） Intake information of Drug Treatment and Rehabilitation Centre(s)(if applicable) 如項目擬為戒毒治療和康復中心內的康復者提供服務，請列出中心過去六個月的入住情況* If the project is to provide service to rehabilitees staying in drug treatment and rehabilitation centre(s), please list intake information of the centre(s) for the past six months*	
41. 中心名稱 Name of Centre _____ 名額 Capacity _____	
42. 過去六個月（即二零二五年二月至七月）新入住總人數： Total number of new admission(s) in the past six months (i.e. from February 2025 to July 2025):	43. 過去六個月（即二零二五年二月至七月）中心住宿總人數（請按人數填寫）： Total number of rehabilitees in the centre in the past six months (i.e. from February 2025 to July 2025) (please state the head count):
* 如項目涉及多於一所戒毒治療和康復中心，請另紙列出資料 Use separate sheets if more than one drug treatment and rehabilitation centre is involved	

VIII. 參考文件，如適用 Supplementary document(s), if applicable
44. <input type="checkbox"/> 推薦信（以證明申請機構／人的能力及／或信譽） Letter of Reference (on the capacity and/or credibility of the Applicant Organisation/Applicant)
45. <input type="checkbox"/> 獲有關機構批准執行此項目的書函 Approval letter from respective authority for the implementation of the proposed project
46. <input type="checkbox"/> 獲轉介機構書面支持此項目的證明 Written proof of support from referring organisation
47. <input type="checkbox"/> 其他，請註明： Others, please specify:

C 部 Part C 項目的財政預算 Budget of project

I. 項目團隊資料 (包括項目負責人／首席研究員) 及員工薪酬 Information of Project Team (including Project Leader/Principal Investigator) and Personal Emolument							
<p>48. 請提供團隊內每個職位名稱、所需經驗及資歷、其在項目中的職責及註明是否需要就職位申請員工薪酬。用於人手的撥款水平，不應高於執行相似工作所需的相類公務員的薪金水平。增聘員工的薪酬一般亦應以政府同類職位對應的政府薪級表（例如總薪級表和第一標準薪級表等）或醫院管理局薪級表（例如醫管局一般職系薪級表）的起薪點為準。如申請機構有為某些職位設立薪級表，請另紙提供作為參考。至於為期超過一年的項目，申請機構／人可就項目推行的第二年及之後各年計入與對應政府薪級表相若的按年增薪額。如以高於起薪點的薪金聘用員工及／或提供按年增薪以挽留資深員工，除非提供充分理據，否則通常不會獲得考慮。</p> <p>Please provide the names of all individual positions in the project team, experience and qualification required, their duties in the project and indicate whether there is a need to apply for personal emolument for the individual post. The level of funding for manpower should not be higher than that for comparable civil service staff needed for taking up similar types of work, and the staff should normally be remunerated at the starting point of the corresponding Government pay scale (e.g. Master Pay Scale, Model Scale I Pay Scale, etc.) or Hospital Authority (HA) Pay Scale (e.g. HA General Pay Scale, etc.) with reference to similar posts in the Government or HA. If the applicant organisation has established a pay scale for specific posts, please provide in separate sheets for reference. For projects that will run for more than one year, the Applicant Organisation/Applicant may factor in an annual increment that is comparable with the corresponding Government pay scale for the second year of project implementation and beyond. Appointment of staff with salaries higher than the starting point, and/or offer of annual increment for retention of experienced staff will normally not be considered unless it is fully justified.</p>							
職位 (全職/兼職) @ Position (Full-time/ Part-time) @	所需經驗及資歷 Experience and qualification required	在項目中的 詳細職責 Full duties in the project	須否就此職位申請員 工薪酬 (是/否) Whether there is a need to apply for personal emolument for the post (Yes/No)	月薪* Monthly salary* (A)	強積金# MPF# (B)	聘用月數 Length of employment (in months) (C)	申請款額 Amount of grant applied for (\$) (A+B)x(C)
例：計劃主任（全職） e.g.: Project Officer (Full-time) (項目負責人/Project Leader)	學位程度；具至少 三年輔導經驗 Degree holder; with at least three-year experience in counselling	計劃及統籌活動 To plan and coordinate activities	<input checked="" type="checkbox"/> 是 / Yes <input type="checkbox"/> 否 / No	\$35,080 (MPS Point: 15)	\$1,500	24 months	\$877,920
例：活動統籌員（兼職） e.g.: Activities Coordinator (Part-time) (其他成員/Other Staff)	專上程度；具至少 一年籌辦活動經驗 Tertiary education; with at least one- year experience in organising activities	執行活動 To implement activities	<input checked="" type="checkbox"/> 是 / Yes <input type="checkbox"/> 否 / No	\$10,385 (i.e. \$20,770 x 0.5 Full- time equivalent) (MPS Point: 6)	\$519.25	24 months	\$261,702
(項目負責人/ 首席研究員/Project Leader/Principal Investigator)			<input type="checkbox"/> 是 / Yes <input type="checkbox"/> 否 / No				
(其他成員/Other Staff)			<input type="checkbox"/> 是 / Yes <input type="checkbox"/> 否 / No				
						49. 小計 Sub-total	

- @ 如擬聘用／調配現職員工參與項目，請提供他們的姓名和履歷，但切勿提供他們的身分證號碼、住址等個人資料。
If it is proposed to employ/deploy existing staff for this project, please provide their names and curriculum vitae. However, please do not provide their personal information such as Hong Kong Identity Card number, residential address, etc.
- * 請註明有關月薪對應的政府薪級表薪點或醫院管理局薪級表薪點（如適用）。若以高於政府／醫院管理局同類職位的起薪點作員工薪金及／或提供年度遞增薪額，須提出充分理由。
Please specify the point of Government pay scale or HA General Pay Scale to which the monthly salary corresponds (if applicable). Full justifications must be provided for the appointment of staff with salaries higher than the starting point of similar posts in the Government or HA and/or offer of annual increment.
- # 強積金供款額應為僱員月薪的5%，或每月\$1,500，兩者以較低為準。
MPF contribution should be 5% of the monthly salary, or \$1,500 per month, whichever is the lower.

50. 聘用代課老師申請（此部分只適用於申請表A部(II) 註明主要或次要性質包含「研究」的項目）
Employment of relief teacher (This part is only applicable to proposal with “Research” as primary or secondary nature as marked in Part A(II) of application form)
請另紙提供聘用代課老師的建議書。建議書需詳列理由、所需人手數目、涉及研究員的姓名、職位、職務、聘用時間和薪酬，並需得到所屬院校的確證（請參閱**禁毒基金一般撥款計劃指引附錄A**的要求及有關條款）。
Please submit a proposal for employment of relief teachers in separate sheets. The proposal should clearly describe the rationale for the needs, the number of relief teachers to be employed, the names of researchers concerned, the position of relief teachers, duties, duration of employment and salary. The proposal must be confirmed by the institution concerned (please refer to the requirements and conditions at **Appendix A of the Guide to Beat Drugs Fund Regular Funding Scheme**).

II. 財政預算分項說明及其理據 Budget breakdown and its justification

請分項列出整個項目的財政預算，包括活動支出（見附錄A的(V)部。如涉及的申請款額用於多過一項活動，相關款額亦未能按活動項目分拆，請於附錄A的(V)部第14項填寫）、員工薪酬（見申請表C部(I)）、外聘核數師費用，以及其他雜項物資／費用（如員工保險、文具、影印費用、郵費等）。

Please provide itemised budget breakdown for the whole project, including expenses on activities (see **Part V of Appendix A**. If the amount of grant applied for is used across more than one activity and the relevant amount of grant applied for cannot be further broken down according to the involved activities, please provide in **Item 14 under Part V of Appendix A**, personal emolument (see **Part C(I) of application form**), external audit fee, and other miscellaneous items/costs (such as staff insurance, stationery, printing charges, postage).

項目 Item(s)	預計的支出 Estimated expenditure (\$) (A)	預計的收入（如有） Estimated revenue (\$) (if any) (B)	申請款額 Amount of grant applied for (\$) (A)-(B)
(a) 活動支出、員工薪酬及外聘核數師費用 Expenses on activities, personal emolument and external audit fee			
1. 項目內所有活動（見附錄 A 的(V)部）（只適用於主要或次要性質包含「預防教育和宣傳」或「戒毒治療和康復」的申請） All activities in the project (see Part V of Appendix A) (Only applicable to proposal with “Preventive Education & Publicity” or “Treatment & Rehabilitation” as primary or secondary nature.)	（請在此填上附錄A的(V)部第15項小計） (Please fill in the Sub-total at Item 15 of Part V of Appendix A)		
2. 員工薪酬（見申請表C部(I)） Personal emolument (see Part C(I) of application form)	（請在此填上申請表第56項小計） (Please fill in the Sub-total at Item		

	56 of application form)		
3. 外聘核數師費用 External audit fee			
(b) 整個項目的雜項物資／費用詳情（如員工保險、文具、影印費用、郵費等） Details of miscellaneous items/ costs of the whole project (such as staff insurance, stationery, printing charges, postage)			
1.			
2.			
3.			
52. 小計 Sub-total :			\$ (52)
行政支援撥款 Administrative Overhead Funding 若為項目申請行政支援撥款，請註明申請款額，並根據 禁毒基金一般撥款計劃指引 第18段及附錄B，提出充分理由（註：毋須列出申請款額的分類細項）。 Applicant Organisation/ Applicant applying for administrative overhead funding is required to specify the applied amount with full justifications in accordance with paragraph 18 and Appendix B of Guide to Beat Drugs Fund Regular Funding Scheme (note: detailed breakdown of applied amount is not necessary).			\$
53.			(53)
54. 減 其他撥款資助來源的收入（包括已獲得或申請中的贊助），請註明： LESS Income from other funding sources (including any sponsorship sought or being sought), please specify:			\$ (54)
55. 此項目向禁毒基金申請的金額 Total amount sought from Beat Drugs Fund for this project			(52)+(53)-(54)= \$

III. 申請撥款超過 600 萬元及／或為期三年以上的項目 Proposed project which exceeds \$6 million and/or lasts for more than 3 years
如符合 禁毒基金一般撥款計劃指引 第10段所述的其中一項條件（即(a)或(b)）的單一項目，其最高撥款額可達1 000萬元，項目為期最長可達五年。如擬議項目符合上述條件(a)，請按指引另紙詳加闡述；如擬議項目符合上述條件(b)，則不需另紙詳加闡述。 The maximum grants disbursed by Beat Drugs Fund for one single project that meets one of the requirements (a) or (b) (see paragraph 10 of Guide to Beat Drugs Fund Regular Funding Scheme) can be up to \$10 million, and the maximum project duration up to five years. For proposed project that meets the requirement (a) above, please elaborate in separate sheets in accordance with the Guide; for proposed project that meets the requirement (b) above, there is no need to elaborate in separate sheets.

D部 Part D 遞交申請表指引 Guidelines on Submitting the Application Form

- 申請機構／人務必填寫申請表的各部分（如申請表內欄位不敷應用，請另紙書寫）。禁毒基金會可能因申請機構／人未能提供某些資料而無法處理申請。本會沒有義務就不完整的申請要求進一步資料。

Applicant Organisation/Applicant must complete every part of this application form (If there is not enough space for entering the information in any section(s) of the application form, please use separate sheets). Beat Drugs Fund Association may not be able to process an application that fails to provide full information. The Association is not obliged to request further information for incomplete applications.

- 填表時請務必參閱《禁毒基金一般撥款計劃 – 二零二五年度撥款計劃指引》，專人送遞的申請表須於二零二五年九月二十三日（星期二）下午六時或之前送抵禁毒基金會（香港金鐘道66號金鐘道政府合署高座30樓保安局禁毒處轉交）。如以郵寄方式遞交，則以二零二五年九月二十三日（星期二）或之前的郵戳為準。如8號或以上熱帶氣旋信號或黑色暴雨警告信號於當日下午二時至六時任何時段生效，申請截止時間將順延至下一個工作日下午六時（星期六、日及公眾假期為非工作日）。
- This form should be completed with reference to “Guide to Beat Drugs Fund Regular Funding Scheme – 2025 Funding Exercise”. Application delivered by hand should reach Beat Drugs Fund Association, c/o Narcotics Division, Security Bureau, 30/F, High Block, Queensway Government Offices, 66 Queensway, Hong Kong **on or before 6:00 p.m. on 23 September 2025 (Tuesday)**. If the application is submitted by mail, the postmark should be on or before 23 September 2025 (Tuesday). If typhoon signal no. 8 or above or black rainstorm warning signal is in force for any duration between 2:00 p.m. and 6:00 p.m. on that day, the application deadline will be postponed to 6:00 p.m. on the next working day (Saturday, Sunday and public holiday are non-working days).
- 遞交前請檢查是否已包括下列文件： Please check whether the following documents have been included before submission:

文件 Documents	是否已夾附？ Attached or not?
申請表（以A4紙雙面打印） Application form, in double-sided A4 papers	<input type="checkbox"/>
（如適用）附錄A（包括活動預算細項附件）（以A4紙雙面打印） (if applicable) Appendix A (including Annex of detailed budget breakdown of activities), in double-sided A4 papers	<input type="checkbox"/>
（如適用）附錄B（包括研究建議書）（以A4紙雙面打印） (if applicable) Appendix B (including Research Proposal), in double-sided A4 papers	<input type="checkbox"/>
（如適用）附錄C（以A4紙雙面打印） (if applicable) Appendix C, in double-sided A4 papers	<input type="checkbox"/>
一個存有申請表及其附錄（應以 微軟 Word 格式 儲存）、活動預算細項附件及所有相關文件電子版本的USB記憶體 A USB flash drive containing softcopy of the application form, appendix(ces) (in Microsoft Word format), annex of detailed budget breakdown and all other supporting documents.	<input type="checkbox"/>
（如屬申請機構）公司註冊證書、商業登記證及／或社團登記證副本 (For Applicant Organisation) Photocopy of Certificate of Incorporation, Business Registration and /or Society Registration	<input type="checkbox"/>
（如屬申請人）附屬機構支持項目的證明文件 (For individual Applicant) Documentary evidence showing that support from affiliated organisations has been obtained	<input type="checkbox"/>
遞交申請聲明 Statement for Application	<input type="checkbox"/>
有關申請的其他附加資料如下（如適用） – Supplementary information of application as below (if applicable) –	<input type="checkbox"/>
◦ 稅務局發出的IR表格第302號（見申請表第30項） Form 302 issued by the Inland Revenue Department (see item 30 of the application form)	<input type="checkbox"/>

文件 Documents

是否已夾附？
Attached or not?

- 推薦信（見申請表第44項）
Letter of reference (see item 44 of the application form) ☐
 - 獲有關機構批准執行此項目的書函（見申請表第45項）
Approval letter from respective authority for the implementation of the proposed project (see item 45 of the application form) ☐
 - 獲轉介機構書面支持此項目的證明（見申請表第46項）
Written proof of support from referring organisation (see item 46 of the application form) ☐
 - 聘用代課老師申請（見申請表第50項）
Employment of relief teacher (see item 50 of the application form) ☐
- 已提交的資料將不會發還。 Submitted documents will not be returned.