

HKCOS- Update of Manpower Change

Report from Training Centre: _____

To: HKCOS Secretariat

Fax: 2873 4077

Training Status	Name	Training Receiving (Period: _____)	Status Update
BST		<input type="checkbox"/> O&T <input type="checkbox"/> Elective OUT to (_____)	<input type="checkbox"/> upgrade to HOT <input type="checkbox"/> Withdraw Training <input type="checkbox"/> Others (_____)
		<input type="checkbox"/> O&T <input type="checkbox"/> Elective OUT to (_____)	<input type="checkbox"/> upgrade to HOT <input type="checkbox"/> Withdraw Training <input type="checkbox"/> Others (_____)
		<input type="checkbox"/> O&T <input type="checkbox"/> Elective OUT to (_____)	<input type="checkbox"/> upgrade to HOT <input type="checkbox"/> Withdraw Training <input type="checkbox"/> Others (_____)
		<input type="checkbox"/> New BST <input type="checkbox"/> Elective IN fr (_____)	
		<input type="checkbox"/> New BST <input type="checkbox"/> Elective IN fr (_____)	
		<input type="checkbox"/> New BST <input type="checkbox"/> Elective IN fr (_____)	
HOT/EEC		<input type="checkbox"/> O&T <input type="checkbox"/> Rotation OUT to (_____)	<input type="checkbox"/> upgrade to Specialist <input type="checkbox"/> Withdraw Training <input type="checkbox"/> Others (_____)
		<input type="checkbox"/> O&T <input type="checkbox"/> Rotation OUT to (_____)	<input type="checkbox"/> upgrade to Specialist <input type="checkbox"/> Withdraw Training <input type="checkbox"/> Others (_____)
		<input type="checkbox"/> O&T <input type="checkbox"/> Rotation OUT to (_____)	<input type="checkbox"/> upgrade to Specialist <input type="checkbox"/> Withdraw Training <input type="checkbox"/> Others (_____)
		<input type="checkbox"/> New HOT <input type="checkbox"/> Rotation IN fr (_____)	
		<input type="checkbox"/> New HOT <input type="checkbox"/> Rotation IN fr (_____)	
		<input type="checkbox"/> New HOT <input type="checkbox"/> Rotation IN fr (_____)	
Trainers	Name	Status Change (if any) e.g. change to private, transfer to other training centres etc	Effective Date
Others (pls specific)			

Name & Signature of Training Director

Date