

Professional Diploma in Horticulture, Arboriculture and Landscape Management (Programme Code: DS524104-PD) (QF Level 4)

Professional Certificate in Horticulture and Arboriculture (Programme Code: DS524104-PC) (QF Level 4)

\*\* Please put a tick  in the appropriate box)

Part A: Information of the employment (To be completed by applicant)	
Name of applicant:	
HKID No.:	
Contact number:	
Email:	
Employer/Organization:	
Position/Rank:	
Period of Services:	From: ____ / ____ MM / YYYY To: <input type="checkbox"/> now <input type="checkbox"/> ____ / ____ MM / YYYY
Details of Services/ Job Descriptions: (Relevant working experience are: Tree care / Horticulture /Landscape management)	

I confirm that the above information provided is correct.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Part B: Acknowledgment (To be completed by the employer of applicant)	
Name:	
Employer/Organization:	
Position/Rank:	
Contact number:	

I certify that the information provided by the applicant is correct.

Signature of Supervisor: \_\_\_\_\_

Department/Company Chop: \_\_\_\_\_

Date: \_\_\_\_\_