



澳門貿易投資促進局
Instituto de Promoção do Comércio e do Investimento de Macau
Macao Trade and Investment Promotion Institute

Grounds for application for the
temporary residency in the

Macao Special Administrative Region

(Managerial Personnel, Professional Technician with Special Qualification)

Note: This form contains a total of 1 page. Please write or type in BLOCK LETTERS, and check the suitable boxes with "✓".

(Please also refer to the Temporary Residency Application Guideline and use the supplementary form if needed)

QT

Reference No.
(Internal Use)

Please choose a category of application:

☒ Renewal application

☐ Application for extension to family dependent(s)

Part 1 - Basic information of applicant					FOR OFFICIAL USE ONLY	
Full Name : <i>Lei Seng Kong</i>			Date of birth: <i>1980/01/02</i> (Y/M/D)		Supplementary explanation:	
Part 2 - Change of Legal Relationship with Accompanying Family Dependents or Staus of (E.g. Divorce, change of de facto marriage status or adoption of children, renewal of employment contract, change of position or company etc.						
<input checked="" type="checkbox"/> No, there is NO change of legal relationship with the accompanying family dependents and the status of my application grounds remains unchanged. <input type="checkbox"/> Yes, there IS/ARE change(s) to the legal relationship with the accompanying family dependents or the status of my application grounds. (Please submit declaration explaining the changes and relevant documents)						
Part 3 - Category and grounds of application					Supplementary explanation:	
<input type="checkbox"/> Management Personnel <input checked="" type="checkbox"/> Technical Personnel						
Current employment relation with Macao Employer Please complete the following information according to the latest employment contract/employment certificate/pay slip (in which basic salary does not include any kind of subsidies/overtime compensation)						
Is the employment contract with the Macao employer in effect? : <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					Supplementary explanation:	
Industry : <i>Traditional Chinese medicine research and testing</i>		Company Name: <i>Macao University of XX</i>				
Position: <i>Professor</i>	Department: <i>Faculty of Chinese Medicine</i>	Basic Salary (MOP) <i>60,000.00</i>	Period of Recruitment From (Y/M/D) <i>2019/1/1</i> To (Y/M/D) <i>2029/12/31</i>			
Workplace and location(Please provide the name of workplace and detailed address)	<i>Faculty of Chinese Medicine of the Macau University of XX Avenida Wai Long, Macau University of XX Edf. E, Sala 101-109, Taipa, Macua</i>				Supplementary explanation:	
(This column is applicable specifically to application under the category Management Personnel)						
Number of staff supervised (both directly or indirectly)	<input type="checkbox"/> <50 persons <input type="checkbox"/> 50-99 persons <input type="checkbox"/> ≥ 100 persons <input type="checkbox"/> ≥ 100persons as manager at a decision-making level		(Compulsory) Total: _____persons			
Amongst whom, number of Macao permanent residents	<input type="checkbox"/> <25 persons <input type="checkbox"/> 25-49 persons <input type="checkbox"/> ≥ 50 persons		(Compulsory) Total: _____persons		Supplementary explanation:	
(This column is applicable specifically to application under the category Technical Personnel)						
Main responsibilities of the position	<input checked="" type="checkbox"/> Senior Professional Personnel (with Managerial and teaching staff) <input type="checkbox"/> Professional Personnel (Technical level only , without management) <input type="checkbox"/> Assistive professional personnel /Non professional personnel					
I hereby declare that all information given in this form is true, complete and accurate, and I understand that I will be responsible for relevant legal consequences if the information furnished here is untrue.					Drafting Staff() :	
The applicant form must be signed in accordance with the signature style on the submitted travel document					Date: (dd) (mm) (yy)	
Date: <i>XX(dd)XX(mm)20XX(yyyy)</i> Applicant's signature: <i>XXXXXX</i>						
FOR INTERNAL USE						
I, based on the (doc.) _____ No. _____ issued by _____ , hereby sign to verify that _____ is identical to the original. Macao, _____ (dd)/ _____ (mm)/ _____ (yyyy) Macao Trade and Investment Promotion Institute's staff (no. _____)						