

Date 日期: \_\_\_\_\_

To: City Credit Investment Bank Limited

To: CCIB Product Nominees Limited

**Amendment Form for Employment Information 職業資料變更表格**

Please complete the form in English 請以英文填寫表格

CR No.: \_\_\_\_\_

Name(s) 姓名: \_\_\_\_\_

**The full name of the person to whom the information is related 下列資料所屬者之全名**

Full-Time Employed 全職\*  Self-Employed 自僱\*  Not Currently Employed 非在職

Part-Time Employed 兼職\*  Retired 退休  Others 其他: \_\_\_\_\_

\*For Full-Time Employed, Part-time Employed or Self Employed, please provide details.

\*如是全職、兼職或自僱人士，請提供詳細的職業資料和僱主資料。

**Job Information 職業資料**

Occupation 職業 \_\_\_\_\_

Job Title 工作職位 \_\_\_\_\_

Year of Service 服務年資 \_\_\_\_\_

Annual Income (USD) 年度收入 (美元)

< USD 100,000 美元  USD 100,000 - 299,999 美元  USD 300,000 - 599,999 美元

USD 600,000 - 999,999 美元  > USD 2,000,000 美元

**Employer Information 僱主資料**

Name of Employer 僱主名稱 \_\_\_\_\_

Nature of Business 業務性質 \_\_\_\_\_

Website (if any) 網址(如有) \_\_\_\_\_

Telephone 電話號碼 \_\_\_\_\_

Fax 傳真號碼 \_\_\_\_\_

Company Address in English 公司英文地址 \_\_\_\_\_

Company Address in Chinese 公司中文地址 \_\_\_\_\_

**Signature(s) (As per specimen Signature Card) 簽署 (根據客編之簽名樣式)**