

Chief Happiness Officer Association (CHOA)

CHO Appreciation Awards 2024 Application Form

Section 1: Corporate Information			
Name of Company	English		
	Chinese		
Office Address			
Business Nature <i>(Please ✓ in the appropriate □)</i>	<input type="checkbox"/> Catering / Hospitality	<input type="checkbox"/> Consultancy / PR	<input type="checkbox"/> Education
	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Finance / Insurance	<input type="checkbox"/> Government
	<input type="checkbox"/> Information Technology	<input type="checkbox"/> Logistics / Transportation	<input type="checkbox"/> Property / Real Estate
	<input type="checkbox"/> Public Utilities	<input type="checkbox"/> Textiles & Garment	<input type="checkbox"/> Trading / Retail / Wholesale
	<input type="checkbox"/> NGO	<input type="checkbox"/> Others <i>(Please specify)</i> _____	
No. of Employees			
Business Registration No.			
Company Website			
Facebook Profile Link			
LinkedIn Profile Link			
Instagram Profile Link			
Member of CHOA	<input type="checkbox"/> Yes	<input type="checkbox"/> Love to know the details later	
Have you ever participated in the previous CHO Appreciation Awards?	<input type="checkbox"/> Yes, year of participation: _____	<input type="checkbox"/> First time to participate	

Section 2: Contact Person			
Name	English		
	Chinese		
Salutation	<input type="checkbox"/> Dr.	<input type="checkbox"/> Mr.	<input type="checkbox"/> Ms. <input type="checkbox"/> Miss
Position			
Department			
Contact No.	Office		Mobile
Email Address			

Section 3: Application Form	
We are applying for the following award(s)	
1. <input type="checkbox"/> Company Award	
2. CHO Special Award*	
<input type="checkbox"/> Shared Value Award	<input type="checkbox"/> Digital Transformation Award
<input type="checkbox"/> Best Innovative Culture Award	<input type="checkbox"/> People Transformation Award
<input type="checkbox"/> Team Performance Award	<input type="checkbox"/> Employees Wellness Award
<input type="checkbox"/> Back to Normal Workplace Award	
3. <input type="checkbox"/> "Be My Own CHO" Individual Award**	
We nominate _____ candidates to compete for the Individual Award.	
4. <input type="checkbox"/> SME Awards#	

* Each organization can enroll up to 2 Special Awards.

** Each organization can enroll candidates without limit to compete for the Individual Award.

#SME refers to Organizations with 50 employees or below.

<hr/> Authorized Signature	<hr/> Company Chop
Name _____ Position _____	Date _____

Other Information:

- Please email the completed application to info@choassociation.org
- For enquiry: Telephone: +852 6263 6263 / Email: info@choassociation.org
- Personal data of applicants are collected and kept for purposes of processing of applications of course enrollment, admission, member administration and general mailing activities. They are not intended to be used for commercial mass contact purposes and will be treated as strictly private and confidential.

Please tick the box to indicate your consent.