

香港航空青年團

HONG KONG AIR CADET CORPS

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From: Phy Asmt Flt, SD Wg	To: All OC Major Units
Email: phyasmt@gmail.com	cc: DCO SD&S, OC SD&S Gp, OC SD Wg
Ref: PT_Memo2305_No28PAITC	Date: 6 March 2023

The No.28 Physical Assessment Instructor Training Course (PAITC) will be held between March and April 2023. The Details of the PAITC are as follows:-

Date:	Theory: 16, 19, 23, 30 March, 1 April 2023
	Practical: 18 March, 7, 8 April 2023
	Exam: 9 April 2023
Time:	Theory: 1900 – 2200 hours
	Practical: 0900 – 1700 hours
	Exam: 0900 – 1700 hours
Venue:	Immigration Department Training and Youth Development Centre (Address: 96 King Fuk Street, San Po Kong, Kowloon)
Target Candidates:	NCO (except Lance Corporal) or above
Course Instructors:	CPAI CHAN Hiu-yu, and other SPAI/PAI and Flt staffs
Class Size:	Max 15
Course Fee:	\$50
Deadline of Application:	14 March 2023 2100 hours

Remarks:

- 1) Candidate(s) must complete the Physical Test before the end of the course;
- 2) Candidate(s) must meet Level 3 (obtain 18 marks) of the HKACC Physical Achievement Test;
- 3) Candidate(s) who fail the Physical Test will RTU;
- 4) Candidate(s) attending less than 100% of the course will not be eligible for examination;
- 5) Candidate(s) who successfully passed the Course Exams are required to perform Practical Part & organise a physical training and sports related project to achieve the requirements of registration of Physical Assessment Instructor;
- 6) Experience in organising sports event(s) is preferable;and
- 7) Please use the standard email title as the following:
[PAITC]_Application_XXXUnit_XXX(Name).

For interested member(s), please submit (i) a completed reply form and (ii) PAR-Q form (Appendix I) by **14 March 2023 2100 hours** via e-mail (phyasmt@gmail.com) and copy to (chanhiuyu7052@yahoo.com.hk.)

Should you have any queries, please feel free to contact us at phyasmt@gmail.com or CPAI, WO CHAN Hiu-yu at 9405 4806.

Fg Off (sp) Ken K L WONG
OC Phy Asmt Flt
SD Wg, SD&S Gp

No.28 Physical Assessment Instructor Training Course Application Form

Personal Information:

Name: _____ (English) _____ (Chinese) Rank: _____
Unit: _____ Serial No.: _____ Gender: _____
E-mail: _____ Contact No: _____

Emergency Contact Person Name: _____ Contact No: _____

Unit Contact Person: _____ Rank and Post: _____
E-mail: _____ Contact No: _____

Sports Related Qualification: (e.g.: Coaching Cert, First Aid Cert, Sports related workshop/Courses)

Association	Qualification	Years of issue	Expiry Date

Sports Training Experience:

