

# Good MPF Employer Award 2024-25



Application Form for Employers (Application Deadline: 15 July 2025)

## Points to note:

- You are encouraged to submit your application to the Mandatory Provident Fund Schemes Authority (MPFA) via the [online application system](#) (click [here](#)), which is more efficient and convenient.
- If you choose to use this application form (Form), please type the information directly in the fields and email the completed Form to [goodMPFemployer@mpfa.org.hk](mailto:goodMPFemployer@mpfa.org.hk). Handwritten Form may result in a longer processing time.
- You will receive an email to acknowledge the receipt of your application. Please do not submit duplicate application of printed and/or online versions.
- For details of the Good MPF Employer Award, e-Contribution Award and MPF Support Award (Award(s)), please refer to the [Detailed Eligibility and Assessment Criteria](#).
- Please read the Personal Information Collection Statement before completing this Form.
- Please read the Declaration carefully in Part VI before you submit this Form.
- Application for the Award(s) is voluntary. If you fail to provide the requested information (including any personal data required), your application may not be processed or considered, or may be delayed.
- The MPFA reserves the sole and absolute right to vary or cancel this programme or the Award(s) or amend or alter the requirements and arrangements at any time without prior notice. In case of any dispute, the MPFA's decision shall be final and conclusive.
- The MPFA shall not be responsible for (a) any matters in relation to the submission, loss, delay, or transmission error of any information of the applicant due to technical problems (including, without limitation, any internet or computer problems); (b) any dispute or liability in relation to this programme or the Award(s); and (c) any related obligations, costs, expenses, losses or damage incurred by applying for the Award(s).
- For enquiries, please visit the MPFA's website at [www.mpfa.org.hk](http://www.mpfa.org.hk), call the hotline on 2292 1222 or email enquiry at [goodMPFemployer@mpfa.org.hk](mailto:goodMPFemployer@mpfa.org.hk).
- Should there be any discrepancy between the English and Chinese versions of this Form, the English version shall apply and prevail.

## Part I Company / Organization Details

Our company / organization is applying for the Award(s) for **the first time**.

Our company / organization is applying for the Award(s) and has **previously been awarded** the Good MPF Employer Award.

(Year(s) awarded:  2014-15  2015-16  2016-17  2017-18  2018-19  2019-20  2020-21  
 2021-22  2022-23  2023-24)

Our company / organization has **changed the name, and received the previous Good MPF Employer Award(s) under the former name**.

If applicable, please provide the former Chinese and English names. The MPFA will contact you later to request further information.

**Former** English Name:

**Former** Chinese Name:

Our company / organization received the **nomination by employee / MPF intermediary**.

Nomination Reference Number:

Company / Organization Name

English:

Chinese:

<b>Company / Organization Name on Electronic Certificate of the Award(s) (Certificate)</b> Please note: If your company/organization meets the criteria to receive the Award(s) after assessment, <b>the name you fill in below will be directly shown on the e-Certificate. Please fill in and check the information with care to ensure accuracy.</b> The e-Certificate can show up to five rows of texts. The first three rows are for English, each row is limited to 50 English letters; the fourth and fifth rows are for Chinese, each row is limited to 20 Chinese characters, including punctuation marks and spaces. Please follow below instructions to fill in each row. Leave the row blank if it is not applicable.		<b>Nature of Business</b> <input type="checkbox"/> Business Management/Consultancy Services <input type="checkbox"/> Catering/Hotel/Tourism <input type="checkbox"/> Construction/Engineering <input type="checkbox"/> Education/Training <input type="checkbox"/> Environmental/Cleaning Service <input type="checkbox"/> Finance/Insurance/Investment <input type="checkbox"/> Health Care/Medical <input type="checkbox"/> IT/Communications <input type="checkbox"/> Logistics/Transportation <input type="checkbox"/> Media/Marketing <input type="checkbox"/> Public Service/Govt. Dept. <input type="checkbox"/> Real Estate/Property Management <input type="checkbox"/> Religious/Non-profit Org. <input type="checkbox"/> Sports/Recreations <input type="checkbox"/> Trading/Wholesale/Retail <input type="checkbox"/> Others	
1st row (English):			
2nd row (English):			
3rd row (English):			
4th row (Chinese):			
5th row (Chinese):			
<b>MPF Participation No.</b> <i>(This number can be located from the MPF Participation Certificate issued by the MPFA, which is a two-letter prefix followed by digits. You may check it with your MPF trustee(s))</i>			
<b>Business Registration Certificate No. / Other Registration Certificate No.</b> <i>(Any other registration number should be given only if you do not process a Business Registration Certificate)</i>		<b>No. of Employees</b> <i>(Full-time and part-time)</i> <input type="checkbox"/> 1-9 <input type="checkbox"/> 10-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-249 <input type="checkbox"/> 250-499 <input type="checkbox"/> 500-999 <input type="checkbox"/> 1,000 or more	
<b>Employer's eMPF ID</b> <i>(Applicable to a company / organization already registered for the eMPF Platform)</i>			
<b>ORSO Registration No.</b> <i>(Applicable to a company / organization participating in an ORSO scheme)</i>			
Website			
Address			
<b>Primary Contact Person Details</b> <i>(To receive information about the Award(s) or enquiries from the MPFA.)</i>			
Title	<input type="checkbox"/> Dr <input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Mrs		
Name		Phone	
Position		Email	
<b>Secondary Contact Person Details</b> <i>(Please provide another contact person information as a backup.)</i>			
Title	<input type="checkbox"/> Dr <input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Mrs		
Name		Phone	
Position		Email	
<b>Part II Good MPF Employer Award</b>			
<b>From 1 April 2024 to 31 March 2025, our company / organization has participated in one (or more) MPF scheme(s) for at least one year.</b>		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>From 1 April 2024 to 31 March 2025, our company / organization offered the following retirement protection to our employees:</b> <i>(Please ✓ where appropriate)</i>			

<input type="checkbox"/>	<p><b>(1) Name of MPF scheme(s) our company / organization has participated in:</b> (Please ✓ where appropriate, you can choose more than one scheme)</p>	<p>AIA Company (Trustee) Limited</p> <p><input type="checkbox"/> AIA MPF - Prime Value Choice</p> <p>Bank Consortium Trust Company Limited</p> <p><input type="checkbox"/> AMTD MPF Scheme</p> <p><input type="checkbox"/> BCT (MPF) Industry Choice</p> <p><input type="checkbox"/> BCT (MPF) Pro Choice</p> <p><input type="checkbox"/> BCT Strategic MPF Scheme</p> <p><input type="checkbox"/> Manulife RetireChoice (MPF) Scheme</p> <p>Bank of Communications Trustee Limited</p> <p><input type="checkbox"/> BCOM Joyful Retirement MPF Scheme</p> <p>Bank of East Asia (Trustees) Limited</p> <p><input type="checkbox"/> BEA (MPF) Industry Scheme</p> <p><input type="checkbox"/> BEA (MPF) Master Trust Scheme</p> <p><input type="checkbox"/> BEA (MPF) Value Scheme</p> <p>BOCI-Prudential Trustee Limited</p> <p><input type="checkbox"/> BOC-Prudential Easy-Choice Mandatory Provident Fund Scheme</p> <p><input type="checkbox"/> My Choice Mandatory Provident Fund Scheme</p> <p>China Life Trustees Limited</p> <p><input type="checkbox"/> China Life MPF Master Trust Scheme</p> <p>HSBC Provident Fund Trustee (Hong Kong) Limited</p> <p><input type="checkbox"/> Fidelity Retirement Master Trust</p> <p><input type="checkbox"/> Haitong MPF Retirement Fund</p> <p><input type="checkbox"/> Hang Seng Mandatory Provident Fund - SuperTrust Plus</p> <p><input type="checkbox"/> HSBC Mandatory Provident Fund - SuperTrust Plus</p> <p>Manulife Provident Funds Trust Company Limited</p> <p><input type="checkbox"/> Manulife Global Select (MPF) Scheme</p> <p>Principal Trust Company (Asia) Limited</p> <p><input type="checkbox"/> Principal MPF - Simple Plan</p> <p><input type="checkbox"/> Principal MPF - Smart Plan</p> <p><input type="checkbox"/> Principal MPF Scheme Series 800</p> <p>Standard Chartered Trustee (Hong Kong) Limited</p> <p><input type="checkbox"/> SHKP MPF Employer Sponsored Scheme</p> <p>Sun Life Trustee Company Limited</p> <p><input type="checkbox"/> Sun Life Rainbow MPF Scheme</p> <p>YF Life Trustees Limited</p> <p><input type="checkbox"/> MASS Mandatory Provident Fund Scheme</p>	<input type="checkbox"/> All staff <input type="checkbox"/> Selected employees who met certain criteria
<input type="checkbox"/>	<p><b>(2) Offered MPF voluntary contributions* to employees</b></p>	<p>Matching voluntary contributions by employees?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<p>Voluntary contributions offered to:</p>	<input type="checkbox"/> All staff <input type="checkbox"/> Selected employees who met certain criteria
<p>*Note: Voluntary contributions to employees refer to the amount of contributions made by employers to employees in an MPF scheme exceeding the amount of mandatory contributions required under the MPF legislation.</p>			
<input type="checkbox"/>	<p><b>(3) Offered other forms of retirement benefits that are related to the MPF System</b></p>	<p><input type="checkbox"/> Made MPF contributions for employees aged 65 or above</p> <p><input type="checkbox"/> Exempted retired employees from MPF and long service payment offsetting</p> <p><input type="checkbox"/> Provided both ORSO and MPF contributions for employees<sup>^</sup></p> <p><input type="checkbox"/> Others, please specify: _____</p>	
<p><sup>^</sup>Note: Providing employees with an option to choose between an MPF Scheme and an MPF-exempted ORSO scheme does not qualify as “additional retirement protection provided to employees” as set out in the <a href="#">Detailed Eligibility and Assessment Criteria</a>.</p>			

**Part III e-Contribution Award** (Applicants must meet the assessment criteria of the Good MPF Employer Award to apply for this Award. Please refer to the [Detailed Eligibility and Assessment Criteria](#) for details.)

From 1 April 2024 to 31 March 2025, our company / organization used the following electronic methods to submit contribution data or make contribution payments, and will use online methods\* to submit application for this year's Award(s). (Please ✓ where appropriate)

<input type="checkbox"/>	Used the eMPF Platform to submit contribution data and/or make contribution payments (Please provide Employer's eMPF ID in Part I)	
<input type="checkbox"/>	Submitted contribution data (e.g. remittance statements) electronically for three months or more	<input type="checkbox"/> By email <input type="checkbox"/> Through website / online platform provided by trustee(s) <input type="checkbox"/> Data file sent via channels specified by trustee(s) (e.g. website, CD-ROM, USB Drive) <input type="checkbox"/> Others, please specify: _____
<input type="checkbox"/>	Made contribution payments electronically for three months or more	<input type="checkbox"/> By direct debit method (i.e. autopay) <input type="checkbox"/> By online banking <input type="checkbox"/> By e-Cheque deposit service <input type="checkbox"/> By PPS <input type="checkbox"/> Others, please specify: _____

#Note: Online methods refer to the application submitted through the online application website provided by the MPFA or by emailing the electronic form in PDF format, **excluding application forms by handwritten, scanned, or sent via fax or post.**

**Part IV MPF Support Award** (Applicants must meet the assessment criteria of the Good MPF Employer Award to apply for this Award. Please refer to the [Detailed Eligibility and Assessment Criteria](#) for details.)

(1) From 1 April 2024 to 31 March 2025, our company / organization provided employees with at least two kinds of support services to help them manage their MPF.

<input type="checkbox"/>	Disseminated the latest information about the eMPF Platform
<input type="checkbox"/>	Organized MPF talks for employees
<input type="checkbox"/>	Provided employees with information about the MPF scheme(s)
<input type="checkbox"/>	Disseminated the latest information about the MPF System to employees
<input type="checkbox"/>	Provided assistance to employees on managing their MPF
<input type="checkbox"/>	Other support services, please specify: _____

(2) The support services provided by our company / organization were related to the following topics:

<input type="checkbox"/>	eMPF Platform
<input type="checkbox"/>	MPF personal accounts consolidation
<input type="checkbox"/>	Employee Choice Arrangement (ECA)
<input type="checkbox"/>	Default Investment Strategy (DIS)
<input type="checkbox"/>	Tax Deductible Voluntary Contributions (TVC)
<input type="checkbox"/>	Performance of MPF funds
<input type="checkbox"/>	Environmental, Social & Governance (ESG) and MPF investment
<input type="checkbox"/>	Managing MPF accounts with digital tools
<input type="checkbox"/>	Others, please specify: _____

**Part V Promotion Channels**

Our company / organization learnt about the Good MPF Employer Award from:

<input type="checkbox"/>	MPFA website
<input type="checkbox"/>	Email from MPFA
<input type="checkbox"/>	Referral by trustees, please specify: _____
<input type="checkbox"/>	TV advertisement, please specify: _____
<input type="checkbox"/>	Outdoor advertisement, please specify: _____
<input type="checkbox"/>	Newspaper, please specify: _____
<input type="checkbox"/>	Publication, please specify: _____
<input type="checkbox"/>	Website, please specify: _____
<input type="checkbox"/>	Emails / letters from other organizations, please specify: _____
<input type="checkbox"/>	Social media (Facebook)
<input type="checkbox"/>	Social media (LinkedIn)
<input type="checkbox"/>	Referral by friends / business associates
<input type="checkbox"/>	Others, please specify: _____

- Our company / organization hereby agrees and declares that:
1. We have read carefully, understood and agreed to all the arrangements and requirements of the application for the Award(s) as set out in the Detailed Eligibility and Assessment Criteria and this Form.
  2. During the entire period from 1 April 2024 to 31 March 2025:
    - We fully complied with the MPF legislation and the ORSO legislation, including the Mandatory Provident Fund Schemes Ordinance (Cap.485 of the Laws of Hong Kong) and the Occupational Retirement Schemes Ordinance (Cap.426 of the Laws of Hong Kong) including their respective subsidiary legislations (referred to as “MPFSO” and “ORSO” respectively).
    - No judgment, order, arbitration award or warning against us was obtained or made by any statutory body or the Government of the HKSAR.
    - No judgement, order, arbitration award or warning was made against us in connection with default or delay in MPF or ORSO contributions, or default or delay in payment of salaries or other employment benefits to employees.
    - We did not have any conviction record of any criminal offence in Hong Kong or elsewhere.
  3. We shall provide our detailed payment records to the MPFA upon its request(s) for random checking to confirm the accuracy of the information provided in this Form.
  4. The MPFA may use the information in this Form for data analysis on a collective basis for future development of the Award(s).
  5. All decisions made by the MPFA regarding the eligibility of our company / organization are final and conclusive.
  6. If an awardee is found to be ineligible or is no longer eligible for the Award(s), the MPFA has the sole and absolute discretion to disqualify the awardee and forfeit the Award(s) at any time without prior notice.
  7. We have read the Personal Information Collection Statement and understand our rights and obligations in relation to the supply of personal data to the MPFA and agree to the manner in which the MPFA may use or deal with the personal data.
  8. After the submission of this Form, we undertake to notify the MPFA of any material changes to, or affecting the validity, completeness or accuracy of, the information provided in this Form and any documents in relation thereto as soon as possible.
  9. We understand that the MPFA will take into account the information provided in this Form and any document submitted by us in relation thereto in assessing this application. All information provided by us in this Form and in any documents in relation thereto is true, correct, complete and up-to-date. We also understand that section 43E of the MPFSO makes it an offence punishable with a maximum of one year’s imprisonment and a fine of \$100,000 on the first occasion and two years’ imprisonment and a fine of \$200,000 on each subsequent occasion for a person who, in a document given to a prescribed person which includes, among others, the MPFA, in connection with the MPFSO, makes a statement that the person knows to be false or misleading in a material respect, or recklessly makes a statement which is false or misleading in a material respect.
  10. We understand that if we provide any false or misleading information before or after any of the Award(s) is granted, or fail to provide information requested by the MPFA, the MPFA has sole and absolute discretion to disqualify the awardee and forfeit any Award(s) granted to the awardee, without prior notice.
  11. For the avoidance of doubts, the MPFA reserves the sole and absolute right to determine the eligibility of any applicant, disqualify any awardee and forfeit the awardee’s Award(s) without prior notice. If the applicant or awardee has breached any of these declarations causing any loss, expenses, costs or damages to the MPFA, the MPFA reserves the right to take legal actions.
  12. We understand that the MPFA has the right to investigate and take necessary actions for any non-compliance with the MPF or ORSO legislation, revealing from the information in this Form or any document submitted by us in relation thereto.
- Our company / organization agrees to become a member of Friends of MPF if it receives the Good MPF Employer Award and to receive publicity materials on the MPF and the MPFA, which will be sent regularly to the primary contact person by email.

Name of company / organization representative	Position	Date

#### Personal Information Collection Statement (PICS):

This PICS is made by the MPFA in accordance with the Personal Data (Privacy) Ordinance (Cap 486) (PDPO). You are advised to read this PICS carefully as it sets out your rights and obligations in relation to your personal data (as defined in the PDPO) and the manner in which the MPFA may collect, use or deal with your personal data for the purposes specified below. When you provide your personal data to the MPFA, please make sure that the personal data is accurate, complete and up-to-date. If you fail to provide the MPFA with the information (including the personal data) required or if the information (including the personal data) provided is inaccurate, incomplete or not up-to-date, your application may not be processed or considered or may be delayed.

#### Purpose of Collection and Use

1. The personal data provided in (or in support of) this application form will be used and held by the MPFA for one or more of the following purposes:
  - (i) process and handling your application for the Good MPF Employer Award 2024-2025;
  - (ii) delivery of award certificate under this application form;
  - (iii) exercising and performing the MPFA’s functions pursuant to the MPFSO and the ORSO;
  - (iv) ensuring compliance with the MPFSO and the ORSO;
  - (v) enabling or assisting the MPFA and other regulatory bodies/law enforcement agencies/government departments to perform functions under the MPFSO and the ORSO or their respective regimes including without limitation monitoring, surveillance, inspection, investigation, taking supervisory and/or enforcement actions, and/or conducting any legal, disciplinary or appeal proceedings, provided that such enablement or assistance by the MPFA is subjected to the MPFSO or the ORSO;
  - (vi) research and statistical purposes; and
  - (vii) other purposes as permitted or required by law.

#### Transfer of Personal Data

2. The MPFA may disclose or transfer your personal data held by the MPFA to any personnel agent, contractor or service provider engaged by the MPFA to provide services or advice in connection with the Good MPF Employer Award 2024-25; and/ or third parties for one or more of the purposes mentioned in paragraph 1 above or any directly related purposes, or in accordance with an order of a court or in accordance with a law or a requirement made under a law.

**Access to Personal Data**

3. You are entitled under the PDPO to ascertain whether the MPFA holds any of your personal data, and to request access to and/or correction of them, in the manner and subject to the limitations as set out in the PDPO. The MPFA has the right to charge a fee as permitted under the PDPO for processing any data access request, which fee shall not be excessive. All enquiries should be directed to:

Personal Data Privacy Officer  
Mandatory Provident Fund Schemes Authority  
Level 12, Tower 1, The Millennium  
98 How Ming Street  
Kwun Tong, Hong Kong

4. This PICS should be read together with the MPFA's Privacy Policy Statement which is available on the MPFA's website at <https://www.mpfa.org.hk/en/privacy-policy>.
5. If there is any inconsistency or conflict between the English and the Chinese versions of the PICS, the English version shall prevail.

**GMEA-AF 2025**