



# 2024/25 年學費資助計劃申請表

## Financial Assistance Scheme 2024/25 Application Form

申請編號 (供辦事處用)

Reference No. (For Office Use)

\_\_\_ / \_\_\_

申請者須於 **2024 年 8 月 16 日 (星期五)** 或之前將申請表連同相關資格證明書交回本校校務處。

The application form, together with the relevant eligibility certificate, should be returned to the General Office by **Friday, August 16, 2024**.

填寫本申請表前請細閱申請須知。

Please read the guidance notes carefully before completing this form.

### (I) 附交文件 Attached Document

請在適當方格內填上 ✓ 號。

Please tick (✓) the appropriate box.

- 綜合社會保障援助申請結果通知書(由 2023 年 4 月 1 日至 2024 年 3 月 31 日)副本乙份。  
A copy of the Comprehensive Social Security Assistance result notification letter (from 1 April 2023 to 31 March 2024).
- 學資處財政資助資格證明書(2024-2025 年度)副本乙份。  
A copy of the Eligibility Certificate (2024-2025 school year) issued by the Student Finance Office.
- Subsidy granted 獲批資助:
- 全額資助 full-level subsidy       半額資助 half-level subsidy

### (II) 就讀本校學生資料 Student's Particulars

如多於一位子女於本校就讀，請於此欄填寫所有子女的資料。

If you have more than one child studying at the College, please fill in the particulars of all your children.

1. 英文姓名 Name in English: \_\_\_\_\_  
(依香港身份證所示 As shown on HKID Card)

中文姓名 Name in Chinese: \_\_\_\_\_ 香港身份證號碼 HKID Card No.: \_\_\_\_\_

本學年班別 (班號) Class (Class No.) in Current School Year: S (2023/24) / (2024/25)\*

\*(請將不適用的部分刪去 Delete whichever is inapplicable)

2. 英文姓名 Name in English: \_\_\_\_\_  
(依香港身份證所示 As shown on HKID Card)

中文姓名 Name in Chinese: \_\_\_\_\_ 香港身份證號碼 HKID Card No.: \_\_\_\_\_

本學年班別 (班號) Class (Class No.) in Current School Year: S (2023/24) / (2024/25)\*

\*(請將不適用的部分刪去 Delete whichever is inapplicable)

3. 英文姓名 Name in English: \_\_\_\_\_  
(依香港身份證所示 As shown on HKID Card)

中文姓名 Name in Chinese: \_\_\_\_\_ 香港身份證號碼 HKID Card No.: \_\_\_\_\_

本學年班別 (班號) Class (Class No.) in Current School Year: S (2023/24) / (2024/25)\*

\*(請將不適用的部分刪去 Delete whichever is inapplicable)

**(III) 申請人資料**  
**Particulars of the Applicant**

英文姓名 Name in English: \_\_\_\_\_  
(請用正楷 Please use block letters)

中文姓名 Name in Chinese: \_\_\_\_\_ 香港身份證號碼 HKID Card No.: \_\_\_\_\_

\* 與申請學生關係 (申請人如非學生父母，請另函作解釋):

Relationship with the student (Please explain in a separate letter if the applicant is not a parent of the student)

- 父親 Father  
 母親 Mother  
 合法監護人 Legal Guardian

居住地址 Residential Address:

\_\_\_\_\_

日間聯絡電話 Daytime contact phone no.: \_\_\_\_\_

住宅電話 Residential phone no.: \_\_\_\_\_

\* 請於適當方格內填上✓號 Please tick (✓) the appropriate box

**(IV) 其他家庭成員資料**  
**Particulars of Other Family Members**

**A. 配偶 Spouse**

已婚 Married

配偶英文姓名 Name of your spouse in English: \_\_\_\_\_  
(請用正楷 Please use block letters)

配偶中文姓名 Name of your spouse in Chinese: \_\_\_\_\_

配偶之香港身份證號碼 HKID Card No. of your spouse: \_\_\_\_\_

- 分居 Separated  
 離婚 Divorced  
 喪偶 Spouse Deceased

**B. 同住未婚子女 (如適用) Unmarried children residing with the family (If applicable)**

**非就讀本校的子女 Children who are NOT studying at our College**

姓名 Name	年齡 Age	在學 Under Education	就業 In Employment	失業 Unemployed	其他 Other
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> (_____)
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> (_____)
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> (_____)
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> (_____)

**(V) 家庭收入**  
**Family Income**

請填報你及你的家庭成員於 **2023年4月1日至2024年3月31日** 期間的工作資料及收入。如屬家庭主婦、失業或已退休，請註明情況及有關時段。

Please provide information on the working status and income of your own self and your family member(s) during the period from **April 1, 2023 to March 31, 2024**. If you / your family member(s) was/were a housewife, unemployed or retired during this period, please so specify and indicate relevant duration.

申請人及家庭成員 Applicant and family member	職位 Position	工作機構名稱 Company's name	辦事處電話 Office Tel. No.	全年總收入 Total Annual Income (\$)
申請人 Applicant				
配偶 Spouse				
同住未婚子女(如適用) Unmarried child residing with the family (if applicable) 姓名 Name: _____				
同住未婚子女(如適用) Unmarried child residing with the family (if applicable) 姓名 Name: _____				
同住未婚子女(如適用) Unmarried child residing with the family (if applicable) 姓名 Name: _____				
其他收入 (如適用) Other income (if applicable) 租金收入 Rental income				
贍養費 Alimony				
子女及親友津助 Contribution from children, relatives or friends				
其他 (請說明) Others (please specify)				

總計 Total: \_\_\_\_\_

**(VI) 申請人聲明**  
**Applicant Declaration**

本人\_\_\_\_\_ (姓名) 已閱讀及完全明白貴校學費資助計劃申請須知及同意申請資助的有關安排。本人特此承諾及保證遵從一切在申請須知內列出的要求及細則作此申請並特此聲明：

1. 本人於申請表內填報的資料及所提交的證明文件均屬完整真確；
2. 本人同意校方根據申請須知處理及使用本人在申請表內提供的個人資料，並向有關人士查核及透露有關個人資料。
3. 本人明白及同意校方會根據本人所提供的一切資料評估本人家庭的資助資格及幅度；
4. 本人明白如資料不完整／隱瞞事實／提供錯誤或誤導資料，本人的申請資格可被取消及／或需歸還已發放的資助金額。

I, \_\_\_\_\_ (Name) have read and fully understood the "Guidance Notes on the College's Financial Assistance Scheme" (GN). I fully understand the arrangements stated therein and hereby undertake that I will comply with all the provisions in relation to my application. I also hereby declare that:

1. The information and documentary evidence that I provided via this application form are complete and true.
2. I give consent to the College to process my application and use the personal data provided to the College in connection with this application form in accordance with the GN and to liaise with related parties to verify and disclose the information provided to the College.
3. I understand and agree that the College will assess the eligibility and assistance level of my family based on the information provided by me.
4. I understand that any Insufficient information / misrepresentation of facts / provision false and misleading information may lead to disqualification of application and/or full recovery of any financial assistance already granted.

日期

Date: \_\_\_\_\_

申請人簽署

Signature of Applicant: \_\_\_\_\_