



(For staple)



# STUDENT FINANCIAL ASSISTANCE AGENCY 學生資助辦事處

## APPLICATION FOR KINDERGARTEN AND CHILD CARE CENTRE FEE REMISSION (2009/10)

### 幼稚園及幼兒中心學費減免申請表 (2009/10)

申請人如需此表格的中文版本，請向幼稚園/幼兒中心索取。

Please read the 'Guidance Notes on Application for Kindergarten and Child Care Centre Fee Remission' ('Guidance Notes') carefully before completing this application form.

#### PART I PARTICULARS OF STUDENT-APPLICANT

\*Please delete as appropriate \*Please circle the appropriate box

1. School Attending \_\_\_\_\_

2. Name in Chinese \_\_\_\_\_

3. Name in English \_\_\_\_\_

4. H.K. Birth Certificate No./ Travel Document No.# \_\_\_\_\_

5. Date of Birth \_\_\_\_\_ Y \_\_\_\_\_ M \_\_\_\_\_ D

6. Sex\*  M Male  F Female  Y  N\*

For Office Use (1) \_\_\_\_\_

For Office Use (2)  Y  N

To be filled in by school

Class/Session \_\_\_\_\_ (Note 1)/\_\_\_\_\_(Note 2)

Admission Month  
Y \_\_\_\_\_ M \_\_\_\_\_

Application Form received on  
Y \_\_\_\_\_ M \_\_\_\_\_ D \_\_\_\_\_

Note 1  
**Kindergarten**  
 U = Upper Class  L = Lower Class  N = Nursery Class

**Child Care Centre**  
 D = Child Care Centre (Group aged 2-3)  C = Child Care Centre (Group aged 0-2)

Note 2  
 A = A.M.  P = P.M.  W = Whole Day

#### PART II PARTICULARS OF APPLICANT AND SPOUSE

\*Please circle the appropriate box

**A. Applicant**

1. Name in Chinese \_\_\_\_\_

2. Name in English \_\_\_\_\_

3. H.K. ID Card No. \_\_\_\_\_

4. Date of Birth \_\_\_\_\_ Y \_\_\_\_\_ M \_\_\_\_\_ D

5. Relationship with student-applicant\*  A Parent  B Others (Please provide a written explanation on why the application is not submitted by the student's parent)  Y  N\*

6. Sex\*  M Male  F Female

**B. Spouse** (He/She should not be in receipt of Comprehensive Social Security Assistance.)  
[Please read Part C(II) B of Guidance Notes before completing]

Name \_\_\_\_\_ H.K. ID Card No. \_\_\_\_\_ Date of Birth \_\_\_\_\_ Y \_\_\_\_\_ M \_\_\_\_\_ D  Y  N\*

#### PART III PARTICULARS OF OTHER FAMILY MEMBERS (They should not be in receipt of Comprehensive Social Security Assistance.)

\*Please circle the appropriate box

**A. Unmarried children residing with the family (Student-applicant reported in "Part I" excluded)**

Please indicate whether copies of the respective identity documents had been submitted when applying for this Scheme in or after 2005/06 school year?

Name	H.K. ID Card No. [Please refer to para. 2 of Part C(III) of Guidance Notes]	Date of Birth	Present Status *			<input type="checkbox"/> Y <input type="checkbox"/> N*
			Student	In employment	Others	
1. _____	_____	_____ Y _____ M _____ D	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> Y <input type="checkbox"/> N*
2. _____	_____	_____ Y _____ M _____ D	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> Y <input type="checkbox"/> N*
3. _____	_____	_____ Y _____ M _____ D	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> Y <input type="checkbox"/> N*

**B. Dependent Parent (Please refer to paragraph 3 of Part C (III) on page 7 of Guidance Notes for definition of 'Dependent Parent')**

Name	H.K. ID Card No. [Please refer to para. 2 of Part C(III) of Guidance Notes]	Date of Birth	<input type="checkbox"/> Y <input type="checkbox"/> N*	<input type="checkbox"/> Y <input type="checkbox"/> N*
1. _____	_____	_____ Y _____ M _____ D	<input type="checkbox"/> Y <input type="checkbox"/> N*	<input type="checkbox"/> Y <input type="checkbox"/> N*
Please confirm if the above-named 'Dependent Parent' has met the requirements stated in paragraph 3 of Part C (III) on page 7 of Guidance Notes.			<input type="checkbox"/> Y <input type="checkbox"/> N*	<input type="checkbox"/> Y <input type="checkbox"/> N*
2. _____	_____	_____ Y _____ M _____ D	<input type="checkbox"/> Y <input type="checkbox"/> N*	<input type="checkbox"/> Y <input type="checkbox"/> N*
Please confirm if the above-named 'Dependent Parent' has met the requirements stated in paragraph 3 of Part C (III) on page 7 of Guidance Notes.			<input type="checkbox"/> Y <input type="checkbox"/> N*	<input type="checkbox"/> Y <input type="checkbox"/> N*

#### PART IV FAMILY INCOME (Applicant should fill in the annual family income during the period from 1 April 2008 to 31 March 2009.)

① Annual income of applicant \$ \_\_\_\_\_

② Annual income of applicant's spouse \$ \_\_\_\_\_

③ 30 % of annual income of unmarried children residing with the family \$ \_\_\_\_\_

④ Contribution from other children and relatives / friends in the above-stated period \$ \_\_\_\_\_

⑤ Other annual income (e.g. alimony, rental income), please specify: \_\_\_\_\_ \$ \_\_\_\_\_

**Total Annual Income i.e. ① + ② + ③ + ④ + ⑤ \$ \_\_\_\_\_**

For Office Use (3)

C	S	B	P
C	S	B	P

#### PART V COMPREHENSIVE SOCIAL SECURITY ASSISTANCE (CSSA): (Old Age/Disability Allowance excluded)

\*Please circle the appropriate box

1. The student-applicant is not in receipt of CSSA from the Social Welfare Department (SWD).  1\*

2. My family is applying for CSSA from SWD, eligibility not yet confirmed.  2\*

3. The student-applicant is in receipt of CSSA from SWD. File Ref. No.: \_\_\_\_\_  3\*

For Office Use (4)

	T	1	2	3	4	5
	6	7	8	9	M	P

