

Part IX Checklist

Attention :

It is the responsibility of the applicants to complete the application form fully and truthfully and to provide all the supporting documents. The Grantham Scholarships Fund Committee/the Student Financial Assistance Agency will assess the eligibility for and the level of financial assistance to be granted based on the information provided by the applicants in this application and/or the application for the other financial assistance schemes administered by the SFAA. Insufficient information / misrepresentation of facts will render the application disqualified for further processing.

Please check the following items carefully. Put a “√” for the completed tasks and a “X” for any items not applicable.

Personal Identification

1. Copies of the HK Smart ID Card of the applicant, his/her spouse, the student-applicant and all other members mentioned in this form affixed onto Annex 1.

2. A copy of the student's valid travel document for students whose HKID Card bear the symbol “C” (Conditional Stay).

Family Background

3. For single-parent families, a copy of the divorce certificate, death certificate or report of the missing persons.

4. For applicant who is not the parent of the student-applicant, the reasons why the application is not submitted by the parent provided in a letter.

Income Certificates

5. Please submit the documentary proof of the total income earned by the applicant/applicant's spouse/unmarried children residing with the family for the period from 1 April 2008 to 31 March 2009 in accordance with the requirements listed below:

(a) Salaried employed person	<ul style="list-style-type: none"> ● Tax Demand Note issued by the Inland Revenue Department; if not available ● Employer's Return of Remuneration and Pensions Form; if not available ● Salary Statement; if not available ● Bank transaction record showing payment of salary, allowance, etc.(together with the page showing the name of bank account holder) (Please highlight the entries with colour and remarks); if not available ● Income Certificate certified by the employer (See Annex 3), etc. 	<input type="checkbox"/>
(b) Self-employed vehicle driver, sole proprietor or partner of partnership business	<ul style="list-style-type: none"> ● Profit and Loss Account (See Annex 4) <u>and</u> ● Personal Assessment Notice (if applicable). 	<input type="checkbox"/>
(c) Salaried employed or self-employed person (except category (b) above) who cannot produce any income proofs	<ul style="list-style-type: none"> ● Please follow Annex 2 to provide Self-prepared Income Breakdown detailing the calculation of the reported income and explaining why income proof cannot be produced. (The SFAA reserves the right to decide whether applications from those applicants who cannot provide reasonable justification for not producing income proof would be accepted.) 	<input type="checkbox"/>
(d) Landlord with rental income	<ul style="list-style-type: none"> ● Tenancy Agreement ; if not available ● Bank transaction record showing rental income (together with the page showing the name of bank account holder) (Please highlight the entries with colour and remarks) 	<input type="checkbox"/>

Medical Expenses of Chronic Diseases

6. For family members (including dependent parents) who are chronically ill or permanently incapacitated, the following documents are required as proof for any medical expenses incurred:

(a) Medical Report	Medical History / Report for the period 1 April 2008 to 31 March 2009 (Please list the details)	<input type="checkbox"/>
(b) Proofs of Medical Expenses	Proofs for Medical Expenses (such as medical receipts), showing the items and amount for the period 1 April 2008 to 31 March 2009	<input type="checkbox"/>

For Official Use

香港智能身份證副本 / 郵寄地址

Copies of Hong Kong Smart Identity Cards / Mailing Address

A. 請把學生、申請人及 / 或配偶及所有在第四部份所填報家庭成員的香港智能身份證副本貼在下面及後頁適當的空格內。

(如沒有香港智能身份證人士，請夾附其他有關的身份證明文件副本，如香港出世紙、回港證、簽證身份書、單程證、中華人民共和國居民身份證等。)

Please paste the **HK Smart ID Card copies** of the student-applicant, the applicant and/or the applicant's spouse and all the family members listed in Part IV in the appropriate spaces below and overleaf :-

(As for those without a Hong Kong Smart Identity Card, please attach copies of other identity documents, such as Hong Kong Birth Certificate, Hong Kong Re-entry Permit, Document of Identity for Visa Purpose, One-way Permit and Mainland Identity Card.)

申請人
Applicant

香港智能身份證副本
Copy of the HK Smart ID Card

申請人 Applicant

申請人配偶
Spouse of the Applicant

香港智能身份證副本
Copy of the HK Smart ID Card

配偶 Spouse

申請學生
Student-applicant

香港智能身份證副本
Copy of the HK Smart ID Card

申請學生 Student-applicant

家庭成員
Family Member

香港智能身份證副本
Copy of the HK Smart ID Card

家庭成員 Family Member

B. 申請人郵寄地址 Applicant's Mailing Address

(請以正楷填寫本回條 Please complete this address-slip in BLOCK LETTERS)

姓名 Name: _____ 地址 Address: _____ _____ _____	姓名 Name: _____ 地址 Address: _____ _____ _____	姓名 Name: _____ 地址 Address: _____ _____ _____
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家庭成員
Family Member

香港智能身份證副本
Copy of the HK Smart ID Card

家庭成員 Family Member

家庭成員
Family Member

香港智能身份證副本
Copy of the HK Smart ID Card

家庭成員 Family Member

家庭成員
Family Member

香港智能身份證副本
Copy of the HK Smart ID Card

家庭成員 Family Member

家庭成員
Family Member

香港智能身份證副本
Copy of the HK Smart ID Card

家庭成員 Family Member

家庭成員
Family Member

香港智能身份證副本
Copy of the HK Smart ID Card

家庭成員 Family Member

家庭成員
Family Member

香港智能身份證副本
Copy of the HK Smart ID Card

家庭成員 Family Member

收入自述書
Self-prepared Income Breakdown

(適用於未能提供收入證明的申請人如小販、三行工人、裝修工人、地盤雜工、散工、清潔工人等。)
(For applicants who cannot provide income proofs such as hawker, construction worker, renovation worker, casual worker, cleaner.)

警告 / WARNING

申請人必須詳實填妥申請書。如有虛報或隱瞞事實，葛量洪獎學基金委員會可能會取消申請人的申請資格及 / 或要求申請人全數歸還已發給的資助金額，更可能將事件轉交警方檢控。申請人須注意，根據盜竊罪條例 (香港法例第210章)，任何人士以欺詐手段取得財產 / 金錢利益是違法行為，一經定罪，可被判入獄十年。

This application must be completed FULLY and TRUTHFULLY. Any misrepresentation or concealment of facts may lead to disqualification of application and/or full recovery of financial assistance already granted, and possible prosecution by the Police. Applicants are reminded that it is an offence to obtain property/pecuniary advantage by deception. Any person who does so commits an offence and is liable on conviction to imprisonment for 10 years under the Theft Ordinance, Chapter 210.

(必須填寫下列所有項目)
(Please fill in all of the following items)

從事下述行業的家庭成員姓名 : _____
Name of the family member engaged in the following business :

(每份收入自述書只可填寫一位家庭成員的收入資料)
(Each self-prepared income breakdown should contain the income information of ONE family member only)

此家庭成員與申請人的關係： # 申請人 / 申請人配偶 / 申請人子女 (#請圈一項)
The relationship between this family member and the applicant : # Applicant / Spouse / Child (# please circle as appropriate)

行業 (例：建造業) : _____
Nature of Industry (e.g. Construction) :

職位 (例：三行工人) : _____
Position (e.g. construction worker) :

實際收入 (如該月份沒有收入，請填上 \$0，切勿漏空任何月份)
Actual Income (If you do not have any income in a specific month, please fill in \$0. Do not leave any month blank)

2008

4月 : HK\$ _____
April : HK\$ _____
5月 : HK\$ _____
May : HK\$ _____
6月 : HK\$ _____
June : HK\$ _____
7月 : HK\$ _____
July : HK\$ _____
8月 : HK\$ _____
August : HK\$ _____

9月 : HK\$ _____
September : HK\$ _____
10月 : HK\$ _____
October : HK\$ _____
11月 : HK\$ _____
November : HK\$ _____
12月 : HK\$ _____
December : HK\$ _____

2009

1月 : HK\$ _____
January : HK\$ _____
2月 : HK\$ _____
February : HK\$ _____
3月 : HK\$ _____
March : HK\$ _____

全年合共 : HK\$ _____
Total Annual Income :

支取薪金方法 (請圈以下適當方格，可選擇多項)
Payment method (Please circle the appropriate item. More than one item may be selected)

A 現金 / 現金支票
By Cash / Cash cheque

B 劃線支票 / 自動轉賬 (請提供銀行存摺副本連戶口持有人姓名頁以茲證明)
By Cheque / Direct Credit (please provide a copy of the transaction record together with the page showing the name of the bank account holder for verification)

未能提供收入證明文件的原因 (請圈以下適當方格)
Reason for not being able to provide income proof (Please circle the appropriate box)

A 沒有固定僱主。
I have no fixed employer.

B 前受僱的公司已倒閉，未能向前僱主索取證明文件。
The company I worked for has wound up and I cannot obtain documentary proof from the ex-employer.

C 其他，請註明：
Others, please specify : _____

聲明：本人謹此聲明，以上資料均屬完整真確。
Declaration : I declare that the above information is true and complete.

申請人姓名 : _____ 申請人香港身份證號碼 : _____
Name of Applicant : _____ HKID No of Applicant : _____
申請人簽名 : _____ 日期 : _____
Signature of Applicant : _____ Date : _____

申請人 / 申請人配偶 / 同住未婚子女收入證明書

INCOME CERTIFICATE

FOR APPLICANT / APPLICANT'S SPOUSE / UNMARRIED CHILDREN RESIDING WITH THE FAMILY

(適用於受薪行業而沒法提供糧單、薪俸稅單、領取薪金的銀行自動轉賬紀錄或

其他收入證明的申請人/配偶/同住未婚子女)

(For applicants, applicants' spouses or unmarried children residing with the family who cannot produce Salary Statement, Salaries Tax Demand Note, Bank Statement showing autopayment of salaries or other income proofs)

第一部 申請學生及申請人個人資料(此欄由申請人填寫)

Part I Particulars of Student-applicant and Applicant (To be completed by Applicant)

學校名稱

Name of School _____

學生姓名

Name of Student _____

申請人姓名

Name of Applicant _____

班級

Class _____

與學生關係

Relationship with Student _____

第二部 申請人/申請人配偶/同住未婚子女[#]入息資料(此欄由申請人/申請人配偶/同住未婚子女[#]僱主填寫)Part II Particulars of Income of Applicant/Applicant's Spouse/Unmarried Child(ren) Residing with the Family[#] (To be completed by Employer of Applicant / Applicant's Spouse / Unmarried Child(ren) Residing with the Family[#])

收入證明書 INCOME CERTIFICATE

茲證明 _____ (香港身份證號碼 _____) 乃本公司職員，職位是 _____。

This is to certify that _____ (HKID Card No. _____) is employed by this company as _____.

在 2008 年 4 月 1 日 至 2009 年 3 月 31 日期間(如不足十二個月，請註明受僱日期：_____)，

其總薪金(包括津貼、僱員強積金供款、佣金、花紅、雙糧、假期工資等其他收入)的全年總和為港幣

_____元*。

His/Her total salary (including allowance, Mandatory Provident Fund contribution by employee, bonus, double pay, leave pay and other income) during the period from 1 April 2008 to 31 March 2009 (please specify the exact employment period if it was less than 12 months: _____) is *HK\$ _____.

僱主簽名

Signature of Employer : _____

僱主姓名

Name of Employer : _____

公司蓋章

Company Chop : _____

聯絡電話

Telephone No. : _____

公司地址

Company Address : _____

日期

Date : _____

(注意：本證明書必須是正本，並備有公司蓋章及僱主聯絡電話。如有塗改，請僱主在旁加簽。)

(Note: The original copy of this Certificate must bear the company chop and telephone number of the employer. Employer's initial is required against any amendment.)

*如此職員支取薪金並非港幣，請註明貨幣種類。

* Please specify the currency if salary paid is not in Hong Kong dollars.

請刪除不適用者。 Please delete where inappropriate.

(如有需要，可自行影印此附表使用)
(Please make copy of this Annex if necessary)

營業損益表 / Profit & Loss Account

附表
Annex

4

(適用於的士司機 / 貨車司機 / 小巴司機)
(For taxi driver / lorry driver / minibus driver)

(適用於獨資經營及合夥業務人士)
(For sole proprietorship or partnership business)

從事下述職業的家庭成員姓名
Name of family member engaged in the following business : _____

的士司機 / 貨車司機 / 小巴司機 (請圈一項)
Taxi driver / Lorry driver / Minibus driver (please circle)

車主 / 租車司機 (請圈一項)
Vehicle owner / Vehicle lessee (please circle)

牌照編號 (車主適用)
License number (for vehicle owner only) : _____

營業損益表 / Profit & Loss Account
由 2008 年 4 月 1 日至 2009 年 3 月 31 日
From 1st April 2008 to 31st March 2009

收入項目 / Income (HK\$)

租金 (只適用於車主)
Rent (for vehicle owner only) \$ _____

自營業務之收益
Profit from operating business \$ _____

其他 (請註明)
Others (please specify) \$ _____

總收入 / Total Income \$ _____

支出項目 / Expenditure (HK\$)
(不包括車輛按揭金額) (excluding vehicle mortgages)
(第 1 及 2 項適用於租車司機, 第 2 至 5 項適用於車主)
(1 & 2 are applicable to vehicle lessee, 2 to 5 are applicable to vehicle owner)

1. 租車支出 / Vehicle rental fee \$ _____

2. 燃油費 / Fuel charges \$ _____

3. 保險 / Insurance premium \$ _____

4. 維修 / Maintenance fee \$ _____

5. 牌費 / License fees \$ _____

6. 其他 (請註明) / Others (please specify) \$ _____

總支出 / Total Expenditure \$ _____

淨盈利 (即總收入 - 總支出)
Net profit (Total Income - Total Expenditure) \$ _____

備註 (未能提供收入證明文件的原因) :
Remark (reason for not being able to provide income proof):

申請人姓名
Name of Applicant : _____

申請人香港身份證號碼
HKID No. of Applicant : _____

申請人簽名
Signature of Applicant : _____

日期
Date : _____

經營下述公司的家庭成員姓名
Name of family member running the following company : _____

公司名稱
Company name : _____

業務性質
Nature of business : _____

公司地址
Company address : _____

獨資或合夥
Sole proprietorship or partnership : _____
(如屬合夥, 請說明利潤分配比率, 如 50% 利潤)
(If it is a partnership, please specify the profit sharing ratio, e.g. Partnership 50%)

營業損益表 / Profit & Loss Account
由 2008 年 4 月 1 日至 2009 年 3 月 31 日 / From 1st April 2008 to 31st March 2009

(A) 總收益 / Gross Income (HK\$) \$ _____

支出項目 / Expenditure (HK\$)
(以下所有支出均屬經營生意支出, 不應包括家庭開支)
(The following are all running costs of the company and should not cover any household expenses.)

購貨成本 / Cost on purchasing merchandise \$ _____

水費 / Water charges \$ _____

電費 / Electricity charges \$ _____

煤氣費 / Gas charges \$ _____

電話費 / Telephone charges \$ _____

租金及差餉 / Rent and rates \$ _____

其他僱員薪金 / Salary of other employees \$ _____

運輸費 / Transportation costs \$ _____

交通費 / Traveling expenses \$ _____

保險費 / Insurance premium \$ _____

機器維修費 / Fees for repair and maintenance of machinery \$ _____

其他 (請註明) / Others (please specify) \$ _____

其他支出項 / Other Expenditure (HK\$)

* 申請人在此公司支取的薪金
Salary of applicant paid by this company \$ _____

* 申請人配偶在此公司支取的薪金
Salary of applicant's spouse paid by this company \$ _____

* 同住未婚子女[§]在此公司支取的薪金
Salary of unmarried children residing with the family[§] paid by the company \$ _____
([§]姓名 / Name : _____)

(B) 總支出 / Total Expenditure (HK\$) \$ _____

家庭收入 = (A) 總收益 - (B) 總支出* + 申請人 / 配偶 / 同住未婚子女在此公司的薪金[#]
Household Income = (A) Gross Income - (B) Total Expenditure* + Salary of applicant / spouse / unmarried children residing with the family paid by this company#
= HK\$ _____

*若公司總收益少於總支出(即(A)<(B)), 營業虧損不可由家庭總收入中扣除。
If Gross Income is less than Total Expenditure (i.e. (A)<(B)), business loss cannot be deducted from the gross household income.

備註 (未能提供收入證明文件的原因) :
Remark (reason for not being able to provide income proof):

申請人姓名
Name of Applicant : _____

申請人香港身份證號碼
HKID No. of Applicant : _____

申請人簽名
Signature of Applicant : _____

日期
Date : _____

GRANTHAM MAINTENANCE GRANTS 2009/10
GUIDANCE NOTES ON APPLICATIONS

1. Grantham Maintenance Grants

- 1.1 The overriding criterion for the grants will be financial need of students. Applicants who are repeaters will not be considered except under very special circumstances.

2. Eligibility

- 2.1 The student is eligible if he/she is pursuing any one of the following full-time courses of study:-

- (a) a secondary day school approved by the Education Bureau – Secondary 4/Senior Secondary 1 or Secondary 5 to 7 course;
- (b) Hong Kong Institute of Vocational Education – the following Post-secondary 3 or Post-secondary 5 courses:-

(i) Post-secondary 3 courses

Course Code	Course Title
01703	Certificate in Vocational Studies (Business)
06721	Diploma in Vocational Education Programme – Business Stream

(ii) Post-secondary 5 courses

Course Code	Course Title	Course Code	Course Title
01601B	Foundation Diploma (Business Stream)	01601P	Foundation Diploma (Sports Stream)
01601C	Foundation Diploma (Computing Stream)	01601V	Foundation Diploma (Automotive Engineering Stream)
01601H	Foundation Diploma (Hospitality Stream)		

- 2.2 The student must be a Hong Kong resident who is not in receipt of the Comprehensive Social Security Assistance (CSSA) in his/her own name or as a member under the applicant's family. However, the holder of the Grantham Maintenance Grants may receive other forms of financial assistance provided that the aggregate amount of financial assistance received is not excessive.
- 2.3 The applicant must be financially in need as assessed under a means test. He/She must be a parent of the student. If both parents have deceased or are unable to exercise their guardianship, the applicant must be the guardian who supports the student. Written explanation on why the application is not made by parents of the student must be provided.
- 2.4 Assessment of eligibility:
- The mechanism for assessment of eligibility (Adjusted Family Income (AFI) mechanism) adopted by the Student Financial Assistance Agency (SFAA) will form the basis of assessing the applicant's financial needs.
 - The Grantham Scholarships Fund Committee (Committee) with the assistance of the SFAA will assess the financial needs of the applicant's family based on the information provided in this application and/or in the applicant's/the spouse's application for other financial assistance schemes administered by the SFAA.

3. Provision / Handling of Personal Data

- 3.1 It is the responsibility of the applicants to complete the application form fully and truthfully and to provide all supporting documents. Insufficient information/misrepresentation of facts will render the application disqualified for further processing.
- 3.2 The Committee/the SFAA will use the personal data in the application and any supplementary information provided on the request of the SFAA for the following purposes:
- Activities relating to the processing and authentication of the application;
 - Activities relating to the recovery of overpayments, if any;
 - Activities relating to the matching of personal data provided against other databases of the SFAA and Social Welfare Department as may be required;
 - Statistics and research purposes; and
 - Processing of applications related to other student financial assistance schemes administered by the SFAA/its agents/other relevant government bureaux/departments.
- 3.3 The personal data and the supplementary information provided may be disclosed to government bureaux/departments, related schools or organizations for the purposes stated in Sub-section 3.2 above; or where the applicant has given consent to such disclosure; or where such disclosure is authorized or required by law. If necessary, the SFAA will seek additional information from the applicant, contact other government bureaux/departments and organizations, including the employers of the family members and based on the findings, make adjustments if necessary to the grant. Any willful misrepresentation and concealment of facts revealed will lead to disqualification, restitution of the grant paid in full and possible prosecution by the Police.

- (a) resided/been residing with the applicant's family and been supported by the applicant/the applicant's spouse; or
- (b) taken up permanent residence at another premises owned or rented by the applicant or his/her spouse (i.e. Name of the applicant and/or spouse should be shown on the relevant lease documents); or
- (c) been living in his/her own premises, rented premises or residing in elderly homes and been totally supported by applicant or his/her spouse.

Remarks: The status of support rendered by the applicant or his/her spouse to their parents in the 2009/10 academic year should be similar to that in the year of assessment. Applicants may be required to provide supporting documents including tenancy agreement, proof of residential address or receipt of the home for the elderly, etc. for verification.

Part IV Particulars of Other Family Members						
15. Unmarried Children Residing with the Family (Position as of September 2009)						
Name (Excluding the Student-Applicant)	HKID Card No. (Please attach a copy)		Present Status (Please circle the appropriate box)			
			Studying (Exclude part-time studies)	Employed	Just Graduated#	Unemployed/ Others
(a) <u>CHAN SIU TIN</u>	Alpha	Numeric	<input type="checkbox"/> R	<input type="checkbox"/> S	<input checked="" type="checkbox"/> T	<input type="checkbox"/> U
(b) <u>CHAN SIU FU</u>	<input type="checkbox"/> A	<input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 (0)	<input checked="" type="checkbox"/> R	<input type="checkbox"/> S	<input type="checkbox"/> T	<input type="checkbox"/> U
(c) <u>CHAN SIU WA</u>	<input type="checkbox"/> A	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 5 (2)	<input type="checkbox"/> R	<input checked="" type="checkbox"/> S	<input type="checkbox"/> T	<input type="checkbox"/> U
			#If the child has just graduated from school in the academic year 2008/09, please circle the box and provide a copy of the graduation certificate or the student ID card.			
16. Dependent Parent (Should <u>not</u> be a recipient of the Comprehensive Social Security Assistance (CSSA)) (Please refer to Paragraph 5.4 of the Guidance Notes for definition of "Dependent Parent")						
			Status (Please circle the appropriate box)			
			Residing with the applicant's family and supported by the applicant or his/her spouse	Taking up permanent residence at another premises owned or rented by the applicant or his/her spouse	Living in his/her own premises, rented premises or elderly homes and is totally supported by the applicant or his/her spouse	
			For a continuous period of not less than 6 months from 1.4.2008 to 31.3.2009			
Name of Applicant's Parent(s)	HKID Card No. (Please attach a copy)					
(a) <u>CHAN HEI LOK</u>	Alpha	Numeric	<input type="checkbox"/> V	<input type="checkbox"/> W	<input type="checkbox"/> X	
(b) _____	<input type="checkbox"/> A	<input type="checkbox"/> 7 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 (6)	<input type="checkbox"/> V	<input type="checkbox"/> W	<input type="checkbox"/> X	
Name of Spouse's Parent(s)	HKID Card No. (Please attach a copy)					
(a) _____	Alpha	Numeric	<input type="checkbox"/> V	<input type="checkbox"/> W	<input type="checkbox"/> X	
(b) _____	<input type="checkbox"/> A	<input type="checkbox"/> _____ ()	<input type="checkbox"/> V	<input type="checkbox"/> W	<input type="checkbox"/> X	

5.5 Part V Family Income

- Item 17: Information of the family members' employment and their respective annual incomes, if applicable, for the 12 months during the period **from 1 April 2008 to 31 March 2009** should be provided with relevant documentary proofs. Reference can be made to the example below. If applicants cannot provide any income proof for special reasons, please notify the SFAA in writing, providing justifiable reasons and the detailed calculation of income by completing Annex 2. Otherwise, the SFAA may make adjustments and apply benchmark figures (based on statistical information provided by the relevant government departments, such as the Census and Statistics Department) to assess the incomes of applicants and their family members. If necessary, the SFAA may require the applicants to provide documentary proof of items which is not listed below or seek further clarification for amounts that were used for maintaining the living of family but have not been accounted for in the application such as savings, loans, and may request the applicants to produce documentary proof including bank savings records, duly signed declaration from the debtor, etc. In case no valid proof is provided, the amounts for maintaining the living of the family may be taken as part of the family income. Other incomes received by the family under item (f) Other Incomes should be listed out.

Part V Family Income (1 April 2008 to 31 March 2009)
17. Family Income
(1) Please provide information on your employment including your occupation, name of organization, office tel. no. and total annual income and those of your family member(s) during the period from 1 April 2008 to 31 March 2009. Please use additional sheet if necessary.
(2) If you/your family member(s) has retired/ was unemployed or was a housewife/ a part-time worker, please specify the status and relevant duration.
(3) If your spouse had deceased, you and your spouse had divorced/separated or your spouse had received CSSA during part or the entire period aforementioned, please provide supporting documents with specification on the date.
(4) Please submit the application form together with the relevant documentary proofs on the annual income earned during the assessment period and follow point 5 of Part IX "Checklist" in submitting the proofs. If no documentary evidence can be provided, please refer to Paragraphs 5.5 & 5.9 of the Guidance Notes and provide details of the family income by completing Annex 2. For such cases, the Student Financial Assistance Agency (SFAA) reserves the right to apply benchmark figures on the basis of the statistical information provided by relevant government departments, such as the Census and Statistics Department (C&SD) to assess your income and those of your family member(s).

Part V Family Income (1 April 2008 to 31 March 2009)						
Applicant and Family Members	Occupation (Please state the period)	Name of Organization & Office Tel. No.		Total Annual Income * (\$)	For Official Use	
(a) Applicant Name: CHAN TAI MING	Accountant (1.4.2008 to 31.8.2008) Retired (with effect from 1.9.2008)	ABC Company (Tel: 1111 1111)		1 2 0 0 0 0		
(b) Spouse Name: WONG LAI	Housewife (1.4.2008 to 31.8.2008) Part-time Cashier (1.9.2008 to 31.3.2009)	ABC Café (Tel: 2123 4567)		9 0 0 0		
(c) Unmarried child residing with the family Name: CHAN SIU WA	Unemployed (1.4.2008 to 31.12.2008) Construction site worker (1.1.2009 to 31.3.2009)	Casual Worker		3 5 0 0 0		
(d) Unmarried child residing with the family Name:						
(e) Unmarried child residing with the family Name:						
(f) Other Incomes (\$)	Contribution from relatives/ friends/ children not residing with the family (Exclude loans)	Rental Income	Interest from fixed deposits / shares	Alimony/ Pension (Exclude the lump sum pension)	Widow's & children's compensation	Others
	12,000	7,000	3,200	1,000		
*Total Annual Income: Salary(including the salary of the applicant, spouse and unmarried child residing with the family for full-time, part-time or temporary job inclusive of Provident Fund or Mandatory Provident Fund contribution), double pay/ leave pay, all kinds of allowances, bonus/ commission/ tips, wages in lieu of notice of dismissal, profit from business/ investment, etc.						

- Types of incomes that are to be reported and those which are not to be reported are listed for your reference:

Items to be reported		Items need not be reported	
1	Salary (including the salary of applicant, spouse and unmarried children residing with the family for full-time, part-time or temporary job inclusive of Provident Fund or Mandatory Provident Fund contribution)	1	Old age allowance
2	Double pay / Leave pay	2	Disability allowance
3	Allowance (including housing/travel/meals/education/shift allowance, etc.)	3	Long service payment / Contract gratuity
4	Bonus / Commission / Tips	4	Severance pay
5	Wages in lieu of notice of dismissal	5	Loans
6	Profit from business / investment	6	Lump sum retirement gratuity / Provident Fund
7	Alimony	7	Inheritance
8	Contributions from relatives / friends / children not residing with the family (in the form of cash, or provision of accommodation, water, electricity or fuel, or subsidies for other living expenses, etc.)	8	Charity donations
9	Interests from fixed deposits, stocks & shares, etc.	9	Comprehensive Social Security Assistance
10	Rental Income	10	Retraining allowance
11	Monthly pension / Widow's & Children's Compensation	11	Insurance / Accident / Injury indemnity

5.6 Part VI Comprehensive Social Security Assistance (CSSA): Excluding Old Age / Disability Allowance

- Item 18: If the student-applicant is receiving CSSA in his/her own name or as a member under the applicant's family, please circle the "Y" box on the right and the application will not be considered. Otherwise, please leave the part blank.
- Item 19: If any other family members are receiving CSSA, the "Y" box should be circled as appropriate and the names of the family members who are in receipt of CSSA, the effective date and the reference no. should be provided. Reference can be made to the following example. Relevant documents should be attached as proof, such as the notification letter or the Certificate of Medical Waiver for CSSA recipients. Otherwise, please leave the part blank.
- If the applicant/any other family member(s) received CSSA during the period from 1 April 2008 to 31 March 2009, please provide the relevant documents. If the student-applicant has successfully applied for the CSSA after submitting the application form, this should be reported to the SFAA as soon as practicable.

Part VI Comprehensive Social Security Assistance (CSSA): Excluding Old Age / Disability Allowance	
18. If the student-applicant is receiving CSSA from the Social Welfare Department (SWD), please circle the "Y" box on the right -----	Y
19. If any other family members are receiving CSSA from the SWD, please circle the "Y" box on the right -----	(Y)
Please specify the name(s) of the family member(s), the effective date and the CSSA reference number below and attach documentary proofs such as the notification letter or the Certificate of Medical Waiver for CSSA recipients.	

Part VI Comprehensive Social Security Assistance (CSSA): Excluding Old Age / Disability Allowance)			
Name(s) of the family member(s)	Effective date	CSSA reference no.	Attention:
(a) CHAN HEI LOK	1.4.2008 – 30.4.2009	CW1-C-11111	(1) The student-applicant must not be in receipt of CSSA in his/her own name or under the applicant's family. (2) If the applicant/any family member(s) received CSSA during the period from 1 April 2008 to 31 March 2009, please provide the relevant documents. (3) If the student-applicant has successfully applied for the CSSA after submitting this application, please inform the office as soon as practicable.
(b)			

5.7 Part VII Other Special Family Information

- Items 20 & 21: Other special family information which the applicant wishes to provide for the Committee's special consideration should be detailed in Part VII with relevant documentary proof. Reference can be made to the following example. The box(es) "Y" should be circled as appropriate and written explanation should be provided separately. Otherwise, please leave the part blank.

Part VII Other Special Family Information	
20. If the applicant has filled in any unmarried child in Part IV who is not a self-bearing child, please specify his/her name below, give a written explanation separately to state the reasons for declaring him/her as family member, provide relevant documents and circle the "Y" box on the right -----	<input type="checkbox"/> Y
21. If the applicant has any special financial hardship / has incurred medical expenses for family members who are <u>chronically ill or permanently incapacitated</u> , please give a written explanation separately to state the details of the situation, relevant duration, provide relevant supporting documents and circle the "Y" box on the right -----	<input type="checkbox"/> Y

5.8 Part VIII Declaration

- The paragraphs should be read through carefully. If the applicant fully understands and agrees to the content of the declaration, he/she should sign and fill in the date in the space provided.

5.9 Part IX Checklist

- The checklists should be read through to ensure that copies of the relevant documents have been provided as attachments to this form. Annexes 1-4 will facilitate the applicant to provide relevant documentary proof for assessment.
- Annex 1 - Copies of HK Smart ID Cards / Mailing Address:** The copies of the HK Smart ID Cards of all the family members the applicant has mentioned in this form should be pasted. The applicant's mailing address should be put down in the space provided.
- Annex 2 – Self-prepared Income Breakdown:** If the applicant/applicant's spouse/unmarried children residing with the family are self-employed (except those described in Annex 4), or have no fixed income, and cannot produce any income proofs, Annex 2 should be filled in.
- Annex 3 – Income Certificate:** If the applicant / applicant's spouse / unmarried children residing with the family are salaried but cannot produce Salary Statement, Salaries Tax Demand Note, Bank Statement showing autopayment of salaries or other income proofs, this form should be completed. The applicant may make copy of the form if more than one income certificate are necessary.
- Annex 4 – Profit and Loss Account:** If the applicant/applicant's spouse/unmarried children residing with the family are self-employed vehicle driver, sole proprietor or partner of partnership business, Annex 4 should be completed.

6. Enquiries

Enquiries on the application of the Grantham Maintenance Grants should be addressed to the Secretary of the Grantham Scholarships Fund Committee on 34/F., Wu Chung House, 213 Queen's Road East, Wan Chai, Hong Kong.

Office Hours: Monday to Friday 8:45 a.m. to 1:00 p.m. and 2:00 p.m. to 5:30 p.m.
 Telephone Enquiry Hotline: 3718 6835
 Website Address: <http://www.sfaa.gov.hk>

Important Notes

- Failure to produce relevant documents without good reasons may lead to rejection of the application.
- All applications and documents submitted are not returnable. Applicants are advised to make their own copies for retention, if necessary.
- Applicants who do not wish to submit the required photocopies of the HKID Cards via the School/Institute may present them in person by making an appointment with the Committee by phone before the deadline for submission of their applications.