



Application Form for Student Activity Subsidies 2026/2027

二零二六/二零二七年度學生活動資助申請表格

FOR OFFICIAL USE 由校方填寫

Application No. 申請編號 _____

Part A 第一部分	Particulars of Student 學生資料
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Full Name in English (Surname first, followed by First Name) 英文姓名 (先填姓氏, 後寫名字)	
Full Name in Chinese 中文姓名	
Student ID No. 學生編號	S
Class Attending in this School Year (Class Number) 本學年就讀班別 (學號)	
Relationship with Applicant 與申請人的關係	

Part B 第二部分	Particulars of Applicant 申請人資料
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Full Name in English (Surname first, followed by First Name) 英文姓名(先填姓氏, 後寫名字)	
Full Name in Chinese 中文姓名	
Hong Kong Identity Card No. 香港身份證號碼	□□-□□□□□□□□ (□)
Year of Birth 出生年份	□□□□
Marital Status 婚姻狀況*	<input type="checkbox"/> Married 已婚 <input type="checkbox"/> Single 未婚 / Separated 分居 / Divorced 離婚 / Spouse deceased 喪偶* (Please provide a copy of relevant supporting documents. There is no need to provide the information of spouse in Part E of this application form. 請提供有關文件之副本, 並無須在申請表第五部分提供配偶資料。)

Residential Address (in English block letters) 居住地址(請以英文正楷填寫)	
Correspondence Address (if different from above) 通訊地址(如與以上不同)	
Residential Phone No. 住宅電話號碼	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Office/Other Contact No(s). 辦事處 / 其他聯絡電話號碼*	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mobile Phone No. 手提電話號碼	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
E-mail Address (for result notification) 電郵地址(用作結果通知之用)	

* Please delete as appropriate 請刪去不適用者

Part C 第三部分	Details of the Activity Enrolled 所參加之活動資料
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Full Name of Activity 活動全名	
Date of Activity 活動日期	
Fee of Activity 活動費用	\$

Part D 第四部分	Financial Assistance Currently Receiving 現正領取之資助
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Relevant supporting documents are required. 必須提供證明文件。

Nature of financial assistance 資助性質	
1. Comprehensive Social Security Assistance Scheme 綜合社會援助保障計劃	<input type="checkbox"/> No 沒有 <input type="checkbox"/> Yes 有
2. School Textbook Assistance / Student Travel Subsidy Scheme under Working Family Student Financial Assistance Agency 在職家庭及學生資助辦事處之書簿或車船津貼	<input type="checkbox"/> No 沒有 <input type="checkbox"/> Yes 有
3. SPKC Fee Remission Scheme 本校學費減免計劃	<input type="checkbox"/> No 沒有 <input type="checkbox"/> Yes 有

Applicants who are receiving any of the above financial assistance can ignore Parts E & F and fill in Part G ONLY.
申請人如已接受以上任何一項資助計劃，只需直接填寫第七部份聲明書。

4. Others 其他 Please specify (請註明)	Amount 金額 \$
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Part E 第五部分	Summary 總表
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Total income of family members from 1 April of the last year to 31 March of this year.
 家庭成員由去年 4 月 1 日至本年 3 月 31 日期間之總收入。

Names of Family Members Name (Including SPKC Student) 家庭成員姓名 (包括本校學生)	HKID Card / Birth Registration Cert. No. 香港身份證/ 出生證明書號碼	Relationship with Applicant 與申請人的關係	Position 身份	Annual Income* 全年總收入(\$)*
		1. Applicant 申請人	<input type="checkbox"/> Employee (Please complete Appendix A) 受僱 (請填附頁 A) <input type="checkbox"/> Self Employed (Please complete Appendix B) 經商/自僱 (請填附頁 B) <input type="checkbox"/> Non-working Group (Please complete Appendix C) 非在職 (請填附頁 C) <input type="checkbox"/> Unemployed 失業 <input type="checkbox"/> Student 學生	(Without decimal places 不用填寫小數位)
		2. Spouse 配偶	<input type="checkbox"/> Employee (Please complete Appendix A) 受僱 (請填附頁 A) <input type="checkbox"/> Self Employed (Please complete Appendix B) 經商/自僱 (請填附頁 B) <input type="checkbox"/> Non-working Group (Please complete Appendix C) 非在職 (請填附頁 C) <input type="checkbox"/> Unemployed 失業 <input type="checkbox"/> Student 學生	(Without decimal places 不用填寫小數位)
		3. Family Members 家庭成員 Relationship 關係	<input type="checkbox"/> Employee (Please complete Appendix A) 受僱 (請填附頁 A) <input type="checkbox"/> Self Employed (Please complete Appendix B) 經商/自僱 (請填附頁 B) <input type="checkbox"/> Non-working Group (Please complete Appendix C) 非在職 (請填附頁 C) <input type="checkbox"/> Unemployed 失業 <input type="checkbox"/> Student 學生 <input type="checkbox"/> Dependent Parent (Please complete Appendix G) 受供養父母(請填附頁 G)	(Without decimal places 不用填寫小數位)
		4. Family Members 家庭成員 Relationship 關係	<input type="checkbox"/> Employee (Please complete Appendix A) 受僱 (請填附頁 A) <input type="checkbox"/> Self Employed (Please complete Appendix B) 經商/自僱 (請填附頁 B) <input type="checkbox"/> Non-working Group (Please complete Appendix C) 非在職 (請填附頁 C) <input type="checkbox"/> Unemployed 失業 <input type="checkbox"/> Student 學生 <input type="checkbox"/> Dependent Parent (Please complete Appendix G) 受供養父母(請填附頁 G)	(Without decimal places 不用填寫小數位)
		5. Family Members 家庭成員 Relationship 關係	<input type="checkbox"/> Employee (Please complete Appendix A) 受僱 (請填附頁 A) <input type="checkbox"/> Self Employed (Please complete Appendix B) 經商/自僱 (請填附頁 B) <input type="checkbox"/> Non-working Group (Please complete Appendix C) 非在職 (請填附頁 C) <input type="checkbox"/> Unemployed 失業 <input type="checkbox"/> Student 學生 <input type="checkbox"/> Dependent Parent (Please complete Appendix G) 受供養父母(請填附頁 G)	(Without decimal places 不用填寫小數位)
		6. Family Members 家庭成員 Relationship 關係	<input type="checkbox"/> Employee (Please complete Appendix A) 受僱 (請填附頁 A) <input type="checkbox"/> Self Employed (Please complete Appendix B) 經商/自僱 (請填附頁 B) <input type="checkbox"/> Non-working Group (Please complete Appendix C) 非在職 (請填附頁 C) <input type="checkbox"/> Unemployed 失業 <input type="checkbox"/> Student 學生 <input type="checkbox"/> Dependent Parent (Please complete Appendix G) 受供養父母(請填附頁 G)	(Without decimal places 不用填寫小數位)

			Other Income (Please complete Appendix D) 其他收入(請填附頁 D)	(Without decimal places 不用填寫小數位) _ _ _ _ _ _ _ _ _ _
Total Annual Family Income (\$) 家庭全年總收入(\$)				(Without decimal places 不用填寫小數位) _ _ _ _ _ _ _ _ _ _

Investment 投資

Name of Family Members 家庭成員姓名	HK ID Card / Birth Registration Cert. No. 香港身份證/ 出生證明書號碼	Relationship with Applicant 與申請人的關係	Items 項目	Annual Investment & Assets 全年總投資及資產(\$)
			Investment (Please complete Appendix E) 投資 (請填附頁 E)	(Without decimal places 不用填寫小數位) _ _ _ _ _ _ _ _ _ _

Assets 資產

Name of Family Members 家庭成員姓名	HK ID Card / Birth Registration Cert. No. 香港身份證/ 出生證明書號碼	Relationship with Applicant 與申請人的關係	Items 項目	Annual Investment & Assets 全年總投資及資產(\$)
			Assets (Please complete Appendix F) 資產 (請填附頁 F)	(Without decimal places 不用填寫小數位) _ _ _ _ _ _ _ _ _ _

Medical Expenses Incurred by Family Member(s) with Chronic Illness 家庭成員涉及痼疾的醫療開支

Name of Family Members 家庭成員姓名	HK ID Card / Birth Registration Cert. No. 香港身份證/ 出生證明書號碼	Relationship with Applicant 與申請人的關係	Items 項目	Annual Medical Expenses 全年總醫療開支(\$) (Without decimal places 不用填寫小數位)								
			Medical Expenses (Please complete Appendix H) 醫療開支(請填附頁 H)	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>								

I have read the “**Guidelines for Application for Student Activity Subsidies**”. I fully understand and agree to the arrangements stated therein in relation to my application. I hereby declare that:

1. The information in this application form and the supporting documents provided by me are true, complete and accurate. I understand and consent that **Stewards Pooi Kei College “the School”** will assess the eligibility and assistance level of my family based on the information provided by me; the School is authorized to conduct authentication of my application (including but not limited to home visits and random checking) to verify whether the information provided therein is true, complete and accurate. I and my family members will fully cooperate with staff of the School; and the School may make adjustment to the assistance level/ amount of financial assistance granted based on the findings of authentication. Any misrepresentation, concealment of facts, provision of misleading or false information or intentional obstruction of school staff in their course of authentication will lead to disqualification of issued notification letter, restitution in full of the assistance granted and possible prosecution. I commit to refund the School any overpayment of financial assistance granted, including financial assistance provided under all financial assistance schemes administered by the School, immediately upon request.
2. I give consent to the School and its authorized bodies to process my application and use the personal data provided to the school in connection with this application form in accordance with Part C of the General Guidance and to liaise with related parties to verify and disclose the information provided by me.
3. I am authorized by all the family members listed in this application form to give consent and hereby give consent on their behalf to the School and its authorized bodies to access such family members’ personal data in accordance with Part C of the Guidelines and to liaise with related parties to verify and disclose the information provided to the school.

本人已細閱「**學生活動資助申請指引**」，並完全明白及同意申請資助的有關安排，本人特此承諾及保證遵守從一切在「申請指引」內列出的要求及細則作此申請。本人特此聲明：

1. 這份申請表內填報的資料及本人陳述和提交的證明文件均屬真實、完整和準確。本人明白及同意**香港神託會培基書院**（下稱「校方」）將根據本人在申請表格所提供的一切資料評估本人家庭的資助及幅度；及校方有權覆核本人的申請，包括但不僅限於以家訪或抽樣調查方式查證，以確實本人提供的資料是真實、完整和準確，本人及本人家庭成員必與校方職員充分合作；及校方校可能會根據調查結果調整本人的資助幅度和資助額。如虛報、隱瞞事實、提供錯誤或誤導的資料，或故意阻撓校方職員進行調查，校方有權即時使該項申請失效或使已簽署的申請結果失效，及取消本人的申請資格，並要求本人退還全部獲發的資助款項，本人亦可能因此被法律訴訟/檢控。本人承諾會在校方的要求下立即將多付予本人的資助歸還校方。
2. 本人同意校方及其授權的機構根據「申請指引」內的 C 部處理及使用本人在申請表內提供的個人資料，並向有關人士及機構查核及透露有關的個人資料。
3. 本人獲本表格內列出的其他家庭成員授權同意，並特此代表他們同意校方及其授權的機構可根據「申請指引」內的 C 部處理及使用他們的個人資料，並同意向有關人士及機構查核及透露他們在此申請表內填報的個人資料。

I would like to receive information of grants or subsidies offered by other organizations (such as the Sir Edward Youde Memorial Fund Scheme) through email from the School.

本人希望日後收到校方透過電郵發出有關其他機構或組織（如：尤德爵士紀念基金）的資助計劃資料。

E-mail Address:

電郵地址： _____

Signature of Applicant:

申請人簽署： _____

HKID Card No. of Applicant:

申請人香港身份證號碼： _____ (____)

Date:

日期： _____

Explanatory Notes for the Application Form:

- Note 1 The members of a family normally refer to the applicant, his / her spouse, unmarried child / children residing with the family and the dependent parent(s) who are supported by the applicant and / or his / her spouse.
- Note 2a Sources of family income include any monthly, daily or other kinds of wage (e.g. salary/commission, double pay/leave pay/ bonus/ contract gratuity, housing/education/shift/ meal/travel allowance etc.), investment income (e.g. interest, share dividends and profit from securities trading etc.), property income (e.g. rental and trading profit etc.). Severance, long service payment, traffic accident/ insurance/injury indemnity, one-off retirement gratuity / provident fund and comprehensive social security assistance are not included.
- Note 2b Documentary evidence is required for various incomes. Please refer to Point I “Documentary Evidence Required” of “Guidelines for Application for Student Activity Subsidies”.

- 註 1 家庭成員指申請人、申請人的配偶、與申請人家庭同住的未婚子女，以及由申請人及/或其配偶供養的父母。
- 註 2a 有關家庭收入來源，包括工作方面的收入，不論是月薪、日薪或任何有價值之報酬(如工資、佣金、雙糧、花紅、房屋及教育津貼等)，投資收入(如銀行利息、股息及證券買賣獲得之收益等)，物業所得租金及商業盈利或所分享的部分盈利。唯收入不包括長期服務金、因工傷而獲得的補償或從社會福利援助計劃所得的款項。
- 註 2b 各種收入必須附有證明文件，詳情請參閱「學生活動資助申請指引」第 I 項「所需之證明文件」。

Declaration Form - For Reference Only

宣誓聲明 - 只供參考

DECLARATION

I, _____ (Name)
Of _____ (Home Address)
Solemnly and sincerely declare that:

- (1) I am the _____ (State relationship, father/mother/legal guardian*)
of the student, _____, (State the name of the student).
- (2) The information provided in this application is true and complete to the best of my knowledge.
- (3) I am aware that Stewards Pooi Kei College will determine the student’s fee remission based on the information provided in the application.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Ordinance.

Declared at

in the HKSAR this _____ day of _____,
through the interpretation of _____,
of _____,
the said interpreter having been also first declared that he /she * had truly, distinctly and audibly interpreted the contents of this document to the declarant, and the he/she* would truly and faithfully interpret the declaration about to be administered to him/her*.

Before me,

Commissioner for Oaths

(signature of declarant)

I, _____, of _____,
solemnly and sincerely declare that I well understand the English and Chinese languages and that I have truly, distinctly and audibly interpreted the contents of this document to the declarant _____, and that I will truly and faithfully interpret the declaration about to be administered to him/her*.

Declared at
in the HKSAR this _____ day of _____,
Before me,

Commissioner for Oaths

(signature of delcarent)

**Please delete where appropriate*

Declaration Form- For Reference Only

宣誓聲明 – 只供參考

聲明

本人， (姓名)
現居於 (住址)
謹以至誠鄭重聲明:

(1) 本人是 _____ (學生姓名) 的
_____ (請申報關係，父/母/合法監護人*)

(2) 據本人所知，在這份申請表所填的各項資料，均屬正確無訛。

(3) 本人知道香港神託會培基書院將根據申請表格上所填報的資料評估學生之學費減免。

本人謹憑《宣誓及聲明條例》衷誠作出此項鄭重聲明，並確信其為真確無訛。

此項聲明於 _____ 年 _____ 月 _____ 日
在香港特別行政區 _____ 作出，
是經由 _____ ，現於 _____
任職 _____ 作出傳譯者，而此傳譯員亦已
先行聲明，他已將本文件內容向聲明人作出真實明確及清晰可
聞的傳譯，並會將本人即時將為聲明主持的聲明忠實向其傳
譯。

(聲明人簽署)

在本人面前作出：

監誓員/律師：.....

本人 _____ 現於 _____
謹以至誠鄭重聲明，本人諳熟本文件所採用的法定語文及
_____ 文，本人已將本文件內容各聲明人
作真實明確及清晰可聞的傳譯，並會將即將為其主持的聲
明忠實向其傳譯。

(傳譯者簽署)

此項聲明於 _____ 年 _____ 月 _____ 日
在香港特別行政區 _____
在本人面前作出：

監誓員/律師：.....

*請刪去不適用處

Annual Income - For Employees
全年收入—受僱

Appendix A
附頁 A

The Applicant and Family Members' total salary, allowance received or receivable from his/ her employer in the past 12 months (From 1 April last year to 31 March this year).

申請人及其家庭成員於過去十二個月 (由去年 4 月 1 日起至本年 3 月 31 日) 之收入、津貼或從其僱主獲得之收入。

Name of Family Member 家庭成員姓名		Relationship with Applicant 與申請人的關係	
Name of Employer and Address 受僱機構名稱及地址			
Occupation & Position 職業及受僱職位		Office Tel. No. 受僱機構電話	
Source of Income ^{Note 2a} 收入來源 ^{註 2a}			Amount (HK\$) 金額 (港幣)
Salary (including the salary of applicant, applicant's spouse and student-applicant's unmarried sibling(s) residing with the applicant for full-time, part-time or temporary jobs, excluding Mandatory Provident Fund (MPF) / Provident Fund contribution by employee) 薪酬 (包括申請人、申請人配偶及申請學生的同住未婚兄弟姊妹的全職、兼職、短期工作的收入, 當中不包括僱員強積金/公積金供款)			
Double pay / Leave pay 雙薪/假期工資			
Allowance (including overtime work / living / housing or rent / transport / meals / education / shift allowance, etc.) 津貼 (包括超時工作/生活/房屋或房租/交通/旅遊/膳食/教育/輪班津貼等)			
Bonus / Commission / Tips 花紅/獎金/佣金/小帳			
Wages in lieu of notice of dismissal 因被撤職而領取的代通知金			
Please put this amount in Part E – Total Annual Family Income 請將此金額填寫在申請表格第五部分內 - 家庭全年收入總計		Sub-total Income 收入	

Income from all sources must be reported. Please provide details in separate sheets if necessary.

所有有關收入來源均須填報, 如有需要, 可另加紙補充。

Self-prepared Income Breakdown 收入自述表

(For Self-Employed, e.g. Taxi Driver, Truck Driver, Mini-bus driver, Sole or Partnership Business)
 #Applicant must complete this form and make declaration of the reasons of no income proof.
 (適用於自僱人士，如的士司機、貨車司機、小巴司機、獨資經營及合夥業務人士等)
 #申請人必須填妥此附頁，及聲明未能提供收入證明之原因。

	Name of Family Member 家庭成員姓名		Relationship with Applicant 與申請人的關係	
Position 身份	Self-Employed 經商/自僱		Nature of Business 業務性質	
Company Name (if any) 公司名稱 (如適用)				
Company Address (if any) 公司地址 (如適用)				
Operating Statement 營業損益表				
Profit and loss of business in the past 12 months (From 1 April of last year to 31 March this year) 在過去十二個月之損益狀況 (由去年四月一日起至本年三月三十一日止)				
Item of Operating Income 營業收入項目				Amount (HK\$) 金額 (港幣)
1.				
2.				
3.				
(A) Total Operating Income 營業總收入				
Item of Operating Cost 營業支出項目				
1.				
2.				
3.				
4.				
5.				
6.				
7.				
(B) Total Operating Cost 營業總支出				
Please put this amount in Part E – Total Annual Family Income 請將此金額填寫於申請表格第五部分內 - 家庭全年收入總計			Net Profit 淨盈利 (A) – (B)	
Reason(s) of no income proof 未能提供收入證明文件原因:				
Warning : The information provided in this declaration must be complete and true. Any person who obtains pecuniary advantage by deception is an offence. In accordance with Cap 201 of Theft Ordinance, any person offend such an offence is liable on conviction upon indictment to imprisonment for 10 years. 警告：本聲明內提供的資料必須是完整及真確。任何人士透過欺詐手段獲得財物 / 金錢利益，即屬違法。根據《盜竊罪條例》(香港法例第 210 章)，任何人如觸犯上述罪行，一經定罪，最高可被判監禁十年。				
Signature of Family Member engaged in this information 陳述以上資料人簽署			Date 日期	

Incomes from all sources must be reported. Please provide details in separate sheets if necessary.
 所有有關收入來源均須填報，如有需要，可另加紙補充。

Self-prepared Income Breakdown 收入自述表

(For Housewife, Non-working Group 適用於家庭主婦 / 非在職人士)

Name of Family Member 家庭成員姓名		Relationship with Applicant 與申請人的關係	
Position 身份	<input type="checkbox"/> Housewife 家庭主婦 <input type="checkbox"/> Non-working Group 非在職人士		
Income ^{note 2a} 收入^{註2a} (if appropriate 如適用)			
Income Statement of the past 12 months (From 1 April of last year to 31 March this year) 在過去十二個月之收入狀況 (由去年四月一日起至本年三月三十一日止)			
Item of Income 收入項目			Amount (HK\$) 金額 (港幣)
1.			
2.			
3.			
4.			
		(A) Total Income 總收入	
Item of Cost 支出項目			
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
		(B) Total Cost 總支出	
Please put this amount in Part E – Total Annual Family Income 請將此金額填寫於申請表格第五部分內 - 家庭全年收入總計		Net Profit 淨盈利 (A) – (B)	
Reason(s) of no income proof 未能提供收入證明文件原因:			
Warning : The Information provided in this declaration must be complete and true. Any person who obtains pecuniary advantage by deception is an offence. In accordance with Cap 201 of Theft Ordinance, any person offend such an offence is liable on conviction upon indictment to imprisonment for 10 years. 警告：本聲明內提供的資料必須是完整及真確。任何人士透過欺詐手段獲得財物 / 金錢利益，即屬違法。根據《盜竊罪條例》(香港法例第 210 章)，任何人如觸犯上述罪行，一經定罪，最高可被判監禁十年。			
Signature of Family Member engaged in this information 陳述以上資料人簽署			Date 日期

Incomes from all sources must be reported. Please provide details in separate sheets if necessary.

所有有關收入來源均須填報，如有需要，可另加紙補充。

Other Incomes ^{Note 2a}
其他收入 ^{註 2a}

Appendix D
附頁 D

Total other incomes received or receivable from other parties by the Applicant, the Applicant's spouse and other family member(s) normally living in the same principal residence during the period from 1 April of last year to 31 March of this year.

申請人、配偶及其他一同居住的家庭成員於去年 4 月 1 日起至本年 3 月 31 日止之其他收入。

Source of other Income 其他收入來源	Applicant 申請人	Applicant's spouse 申請人配偶	Other family member(s) 其他家庭成員	Amount (HK\$) 金額 (港幣)
Interests from fixed deposits, stocks, shares and bonds etc. 定期存款、股票、債券等的利息收益				
Rental income from property, land, carpark, vehicle or vessel (including Hong Kong, the Mainland and overseas) 物業 / 土地 / 車位 / 車輛 / 船隻的租金收入 (包括香港、內地及海外)				
Alimony 贍養費				
Monthly pension / Widow's & Children's Compensation 每月領取的退休金 / 孤兒寡婦金或恩恤金				
Contribution from any person(s) not residing with applicant's family to any of the applicant's family member(s) (including money or contribution of housing / remittance(s) / contribution for mortgage repayment / rent / water / electricity / gas or other living expenses) 由任何非同住人士給予的津助 (包括金錢及住屋、匯款、按揭還款、租金、水、電、燃料或其他生活費用等津助)				
Studentship 研究生助學金				
Others (Please specify) 其他(請註明)				
Please put this amount in Part E – Total Annual Family Income 請將此金額填寫於申請表格第五部分內 - 家庭全年收入總計			Total 合計	

Incomes from all sources must be reported. Please provide details in separate sheets if necessary.

所有有關收入來源均須填報，如有需要，可另加紙補充。

Investment
投資**Appendix E**
附頁 E

Fixed deposit / stocks / shares and bonds / warrants / funds in Hong Kong, Mainland China and other countries on 31 March of this year.

截至本年 3 月 31 日於香港、中國大陸及其他海外的定期存款 / 股票 / 債券 / 股份 / 認股證 / 基金。

Name of Owner 持有人姓名	Fixed Deposit / Name of Stocks / Shares and Bonds / Warrants / Funds 定期存款 / 股票 / 債券 / 股份 / 認股證 / 基金名稱	Quantity 數量	Market Value as on 31 March of this year 截至本年 3 月 31 日之市值
Please put this amount in Part E – Total Annual Investment & Assets 請將此金額填寫於申請表格第五部分內 - 家庭全年總投資及資產		Total 合計	HK\$

Assets
資產

Appendix F
附頁 F

Land, property, carpark, vehicle or vessel in Hong Kong, Mainland China and other countries (excluding the principal family residence) owned by the applicant, his/her spouse and other family member(s) normally living in the same principal residence from 1 April of last year to 31 March of this year.

於去年 4 月 1 日至本年 3 月 31 日期間，申請人、配偶及其他一同居住的家庭成員在香港、中國大陸及其他海外持有的土地 / 物業 / 車位 / 車輛 / 船隻。(主要家庭居所除外)

Item 項目				Net Market Value as of 31 March this year (after Deduction of Outstanding Mortgage Balance) 截至本年 3 月 31 日之 市場淨值(扣除未償還 按揭餘額後)
1	Name of Owner 資產持有人姓名			
	Address of Assets 資產地址			
	Asset Nature 資產性質		Purchase Price 購買價值	HK\$
	Asset Status 資產狀況	<input type="checkbox"/> Empty 空置 <input type="checkbox"/> Rental 出租	Others (Please specify) 其他 (請註明)	
	Mortgage Payment from 1 April last year to 31 March this year. (if applicable) 去年 4 月 1 日至本年 3 月 31 日按揭供款額 (如適用)			HK\$
2	Name of Owner 資產持有人姓名			
	Address of Assets 資產地址			
	Asset Nature 資產性質		Purchase Price 購買價值	HK\$
	Asset Status 資產狀況	<input type="checkbox"/> Empty 空置 <input type="checkbox"/> Rental 出租	Others (Please specify) 其他 (請註明)	
	Mortgage Payment from 1 April last year to 31 March this year. (if applicable) 去年 4 月 1 日至本年 3 月 31 日按揭供款額 (如適用)			HK\$
Please put this amount in Part E – Total Annual Investment & Assets 請將此金額填寫於申請表格第五部分內 - 家庭全年總投資及資產				HK\$

Please provide details in separate sheets if necessary.
如有需要，可另加紙補充。

Medical Expenses Incurred by Family Member(s) with Chronic Illness
家庭成員涉及痼疾的醫療開支

Appendix H
附頁 H

If the applicant has incurred medical expenses for family members (for family members who are chronically ill or permanently incapacitated) during the period from 1 April of last year to 31 March of this year, he / she may provide details of the situation in this appendix. Applicant must provide copy of relevant medical certificate(s) and receipt(s) issued by the hospitals / clinics / registered practitioners to the School for the consideration of deducting such expenses. (For the ceiling of deductible amount for each family member, please refer to part C of the General Guidelines).

申請人如在去年 4 月 1 日至本年 3 月 31 日期間，須支持家庭成員(只限於長期病患者或永久喪失工作能力人士)必要的醫療開支，可於此附頁填寫有關醫療開支的詳情。申請人必須出示醫院／診所／註冊醫生發出的醫生證明書和所有有關收據之副本，才可獲學校考慮扣減有關醫療開支 (每名家庭成員可扣減的款額上限請參閱指引 C 部份)。

Name of Family Member 家庭成員姓名	Name of Incapacity or Chronic Illness 傷殘或痼疾的情況	Medical Expenses (\$) 醫療開支(\$)								
		<table border="1" style="width: 100%; height: 50px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>								
		<table border="1" style="width: 100%; height: 50px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>								
<p style="text-align: center;">Please put this amount in Part E – Total Annual Medical Expenses 請將此金額填寫於申請表格第五部分內 - 全年總醫療開支</p>		<p style="text-align: center;">Total 合計</p> <table border="1" style="width: 100%; height: 50px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>								

Please provide details in separate sheets if necessary.
 如有需要，可另加紙補充。

Copies of HKID Card
香港身份證副本

Appendix I
附頁 I

Please cut and paste the copy of the HKID Cards in the right boxes.

請把香港身份證副本貼在適當位置。

(If the HKID Card is not available, please attach copies of other valid identity documents. e.g. Hong Kong Birth Certificate, Hong Kong Re-entry Permit, Document of Identity for Visa Purposes, One-way Permit, etc.

如沒有香港身份證，請提交其他有效的身份證明文件副本，如香港出世紙、回港證、簽證身份書、單程證等。)

<p style="text-align: center;">Copy of the HKID Card of the applicant 申請人的香港身份證副本</p>	<p style="text-align: center;">Copy of the HKID Card of the spouse 配偶的香港身份證副本</p>
<p style="text-align: center;">Applicant 申請人</p>	<p style="text-align: center;">Spouse 配偶</p>
<p style="text-align: center;">Copy of the HKID Card of family member 家庭成員的香港身份證副本</p>	<p style="text-align: center;">Copy of the HKID Card of family member 家庭成員的香港身份證副本</p>
<p style="text-align: center;">Family Member 家庭成員</p>	<p style="text-align: center;">Family Member 家庭成員</p>
<p style="text-align: center;">Copy of the HKID Card of family member 家庭成員的香港身份證副本</p>	<p style="text-align: center;">Copy of the HKID Card of family member 家庭成員的香港身份證副本</p>
<p style="text-align: center;">Family Member 家庭成員</p>	<p style="text-align: center;">Family Member 家庭成員</p>