Po Leung Kuk Ngan Po Ling College
School Fee Remission Scheme 2025/26
Application Form

A. Applicant's Information (Parent / Guardian)

1. Name in English : _____ Name in Chinese : _____

2. HKID card no. : _____

3. Correspondence Address : _____

_____

4. Telephone (Home) : _____ 5. Telephone (Daytime) : _____

B. Student's Information

1. Name in English : _____ Name in Chinese : _____

2. Class & Class no. : _____ (_____) 3. Student ID card number : 2 0 __ __ __ __ __ __

If applicant have applied Eligible Certificate (EC) from the Student Finance Office (SFO) / Notification of Successful Application (NSA) of Comprehensive Social Security Assistance (CSSA) from the Social Welfare Department, please fill in Sections C, E and F. If not, please fill in Sections D, E and F.

C. Level of Assistance

Level of Assistance* : SFO FULL / SFO HALF / CSSA (valid until: _____)

*☐ *A copy of EC / the latest NSA of CSSA is attached*

D1. Family Information (*For applicants <u>without</u> EC / NSA only*)

*☐ *A copy of identity card or other identity document of the applicant and all family members is attached*

(1) Spouse

1. Name in English : _____ Name in Chinese : _____

2. HKID card no. : _____

3. In case of divorce/separation, or death of the spouse, please specify : _____

(2) Unmarried children residing with the family

(i) 1. Name in English : _____ Name in Chinese : _____

2. Date of Birth : _____ 3. HKID card no. : _____

4. Employment Status* : Studying# / Working / Unemployed / Others, please specify : _____

If the child is currently studying in this college, please specify his/her class and class no. : _____ (____)

(ii) 1. Name in English : _____ Name in Chinese : _____

2. Date of Birth : _____ 3. HKID card no. : _____

4. Employment Status* : Studying# / Working / Unemployed / Others, please specify : _____

If the child is currently studying in this college, please specify his/her class and class no. : _____ (____)

** Please circle / ☑ as appropriate*

(iii) 1. Name in English : _____ Name in Chinese : _____

2. Date of Birth : _____ 3. HKID card no. : _____

4. Employment Status* : Studying# / Working / Unemployed / Others, please specify : _____

If the child is currently studying in this college, please specify his/her class and class no. : _____ (____)

(3) Depending parents/grandparents

(i) 1. Name in English : _____ Name in Chinese : _____

2. Date of Birth : _____ 3. HKID card no. : _____

(ii) 1. Name in English : _____ Name in Chinese : _____

2. Date of Birth : _____ 3. HKID card no. : _____

D2. Family Income

*☐ *A copy of ALL required supporting documents as specified in Appendix 2 is attached*

1. Occupation (During 1 April 2024 to 31 March 2025)

   (a) Applicant's Occupation : _____ Company Name : _____ Telephone (Company) : _____

   (b) Spouse's Occupation : _____ Company Name : _____ Telephone (Company) : _____

2. Annual Family Income (During 1 April 2024 to 31 March 2025)

   (a) Annual Income of Applicant : $ _____

   (b) Annual Income of Applicant's Spouse : $ _____

   (c) Annual Income of the Unmarried Children Residing with the Family : $ _____

   (d) Relatives' Subsidy : $ _____

   Total Amount : $ _____

E. Other family information relevant to the application of School Fee Remission (if applicable)

_____

F. Declaration

I confirm that I have read the explanation notes on School Fee Remission Scheme 2025/26 of Po Leung Kuk Ngan Po Ling College and fully understood and agreed with the arrangement of the application of School Fee Remission. I hereby declare that:

1. The information in this application form and the supporting documents provided by me are true, complete and accurate, and
2. I authorize Po Leung Kuk Ngan Po Ling College to verify the record or information relating to this application with related persons and institutions. Any misrepresentation, concealment of facts, provision of misleading or false information or intentional obstruction of staff in their course of authentication will lead to disqualification of application or disqualification of issued notification letter, restitution in full of the assistance granted and possible prosecution. I commit to refund Po Leung Kuk any overpayment of financial assistance granted immediately upon request.

Date : _____ Signature of applicant : _____

** Please circle / ☑ as appropriate*

保良局顏寶鈴書院
學費減免計劃 2025/26
申請表格

A. 申請人資料 (家長 / 監護人)

1. 英文姓名：_____ 中文姓名：_____

2. 香港身分證號碼：_____

3. 通訊地址：_____

_____

4. 住宅電話：_____ 5. 日間聯絡電話：_____

B. 學生資料

1. 英文姓名：_____ 中文姓名：_____

2. 班別及學號：_____ (_____) 3. 學生編號：2 0 __ __ __ __ __ __

如申請人已申請學生資助處發出的資格證明書 / 社會福利署發出的綜援獲准通知書，請填寫 C、E 及 F 部份。如未有申請相關文件，請填寫 D、E 及 F 部份。

C. 資助幅度

資助幅度*： 全額 / 半額 / 綜援 (有效期至：_____)

*☐ *已附上資格證明書副本 / 綜援獲准通知書副本*

D1. 家庭成員資料 (*僅供未獲得學生資助處發出的資格證明書 / 社會福利署發出的綜援獲准通知書的申請人填寫*)

*☐ *已附上申請人和所有家庭成員的身份證或其他身份證件的副本*

(1) 配偶

1. 英文姓名：_____ 中文姓名：_____

2. 香港身分證號碼：_____

3. 如配偶已/離婚/分居/身故，請註明：_____

(2) 同住未婚子女

(i) 1. 英文姓名：_____ 中文姓名：_____

2. 出生日期：_____ 3. 香港身分證號碼：_____

4. 就業狀況*：在學# / 就業 / 失業 / 其他 (請註明)：_____

如子女現於本校就讀, 請列出其班別和班號：_____ (____)

(ii) 1. 英文姓名：_____ 中文姓名：_____

2. 出生日期：_____ 3. 香港身分證號碼：_____

4. 就業狀況*：在學# / 就業 / 失業 / 其他 (請註明)：_____

如子女現於本校就讀, 請列出其班別和班號：_____ (____)

** 請圈 /☑ 出適當選項*

(iii) 1. 英文姓名：_____中文姓名：_____

2. 出生日期：_____3. 香港身分證號碼：_____

4. 就業狀況*：在學# / 就業 / 失業 / 其他 (請註明)：_____

如子女現於本校就讀, 請列出其班別和班號：_____(　　)

(3) 受供養父母/祖父母

(i) 1. 英文姓名：_____中文姓名：_____

2. 出生日期：_____3. 香港身分證號碼：_____

(ii) 1. 英文姓名：_____中文姓名：_____

2. 出生日期：_____3. 香港身分證號碼：_____

D2. 家庭收入

*☐ *已附上附錄 2 所列全部證明文件的副本*

1. 職業 (指在 2024 年 4 月 1 日至 2025 年 3 月 31 日期間的職業)

(a) 申請人職業：_____公司名稱：_____辦事處電話：_____

(b) 配偶職業：_____公司名稱：_____辦事處電話：_____

2. 全年家庭總收入 (指在 2024 年 4 月 1 日至 2025 年 3 月 31 日期間的收入)

(a) 申請人總收入：　$_____

(b) 申請人配偶總收入：　$_____

(c) 同住未婚子女總收入：　$_____

(d) 親友津助：　$_____

總額：　$_____

E. 其他有關家庭狀況的特別資料 (如適用)

_____

F. 聲明

本人確認已閱讀保良局顏寶鈴書院學費減免計劃 2025/26 年度申請須知，並完全明白及同意申請學費減免的有關安排。現謹此聲明：

1. 這份申請表內填報的資料及本人提交的證明文件均屬真實、完整和準確，及
2. 本人同意授權保良局顏寶鈴書院就有關本表格內之資料，向有關人士及機構查核。如有虛報、隱瞞事實、提供錯誤或誤導的資料，或故意阻撓職員進行調查，保良局有權即時使該項申請失效或使申請結果通知書失效，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，以及本人可能因此被法律訴訟/檢控。本人承諾會在保良局的要求下立即將多付予本人的資助歸還保良局。

日期：_____　　申請人簽署：_____

** 請圈 /☑ 出適當選項*