

地址:沙田馬鞍山利安邨利盛樓地下 G/F. Lee Shing Hse., Lee On Estate, Ma On Shan Shatin N.T. 電話 Tel:26313354

	<u>入學申請</u>	表格Application I	Form .	
<學生資料 Studen	t Information >			
中文姓名: Name in Chinese	英文姓名: Name in English			相片 Photo
	出生地點: M/年Y) Place of Birth			
地址:Address				
住宅電話: Tel	宗教信仰: Religion	型型型型型型型型型型型型型型型型型型型型型型型型型型型型型型型型型型型型型	及: <u>上 午 A.M. / 全</u> pplication	<u> </u>
出生證件編號: Birth Cert. No.				
曾在本校就讀之親屬 Name of relative that has stu	景姓名: died here previously		(關係 Relationship)	
<家長/監護人資	料 Parents / Guardian	's Particulars >		
父	親 Father	母親 Mother	ij	監護人 Guardian
姓名: Name				
職業: Occupation				
手提電話: Mobile Tel. No.				
辦事處電話: Company Tel.				
	連同下列資料交回本校,副本由 ginal form with the following info		copy for your own reco	關係 Relationship ord.
報名手續For Application:1. 出生證明書副本Copy of Birth Certificate.2. 香港兒童免疫接種記錄副本Copy of Hong Kong Childhood Immunization Record.3. 正面半身相片 2 張Two passport-sized photos.4. 回郵信封 5 個Five stamped return envelopes.5. 申請高班或低班插班生請附原校成績或評估報告For K2 & K3 applicants please bring the recent school report.				
	<由本国	園填寫 Official only :	>	
交表日期: Date of application	接見日期: Date of interview	w	備註: Remark	