

仁愛堂顏寶鈴幼稚園

YAN OI TONG NGAN PO LING KINDERGARTEN

入學申請表 Application Form

編號 No. _____

申請兒童個人資料 Personal details of applicant				相片 Photo
學生姓名(中文) Name in Chinese		性別 Sex		
學生姓名(英文) Name in English		出生證號碼 Birth Cert. No.		
出生日期 Date of Birth	年 Year	月 Month	日 Date	出生地點 Place of Birth

家長或個人資料 Personal details of Parents				
父親姓名 Name of Father		職業 Occupation		聯絡電話 Telephone
母親姓名 Name of Mother		職業 Occupation		聯絡電話 Telephone
地址 Address				

報讀班級* Class Enrolment	<input type="checkbox"/> K1 3-4 歲 / years old	<input type="checkbox"/> K2 4-5 歲 / years old	<input type="checkbox"/> K3 5-6 歲 / years old
期望上課時段* Preferred Session	<input type="checkbox"/> 上午 A.M.	<input type="checkbox"/> 下午 P.M.	<input type="checkbox"/> 全日班 Whole Day
申請原因* Reason for application	<input type="checkbox"/> 兄/姊為本園畢業生/在讀生 Brother/Sister graduated /currently studying at this school <input type="checkbox"/> 雙職家庭 Double-income family <input type="checkbox"/> 就近居所 Nearby address <input type="checkbox"/> 其他(請註明) Other (Please specify)		
認識本園途徑* You know our school from	<input type="checkbox"/> 親友 Relative / Friend <input type="checkbox"/> 鄰舍 Neighbour <input type="checkbox"/> 網上資訊 Internet <input type="checkbox"/> 其他 (請註明) Other (Please specify)		

*請用✓表示 Please ✓ as appropriate

家長簽署
Signature of Parent

日期
Date

註： 家長自願向本園提供上述資料，資料將按需要交本園之負責員工運用，以安排適切服務。填妥後請親身或郵寄交回本園。
Remarks: The above information is provided by parents out of their own free will, which will be used by the School for necessary arrangements of various services for the student. Please return the completed form to school in person or by post.

校方紀錄(由校方填寫) School Record (office use only)	收表日期 Date Received		註冊日期 Date Registered	
	約見日期 Date Interviewed		入學日期 Date Enrolled	

本表格保存期限：曾入讀，保存七年(以離園日期計算)；被園方拒絕或自行放棄申請，會即時銷毀。

This form will be kept for 7 years for past students (from date of departure from the school);

This form will be destroyed immediately for children whose applications have either been rejected by the school or cancelled by them.