

# D13a 香港真光中學校內助膳申請表 (201 年-201 年)

中學\_\_\_\_\_班學生\_\_\_\_\_

注意事項：

- 一. 申請表內各欄必須填寫，如不適用者，請清楚註明。
- 二. 此表應由學生家長填寫，如父母俱已亡故，則由負責供養該生的監護人填寫。
- 三. 家長或監護人須為每一學生分別填寫申請表一份。
- 四. 除特殊情況外，申請須每年九月初提出。
- 五. 校方有權對本表格上各項資料進行調查，或進行家訪，申請人若有意虛填及隱瞞事實，其申請資格將被取消。

## 第一部：學生在學資料

英文姓名	中文姓名	班別	入校日期

## 第二部：申請人個人資料

申請人(家長/監護人)英文姓名	中文姓名	配偶英文姓名	中文姓名
香港身份證號碼：_____		香港身份證號碼：_____	
與學生關係：_____		與學生關係：_____	
職業及職位：_____		職業及職位：_____	
(如失業或退休，須註明日期)：_____		(如失業或退休，須註明日期)：_____	
服務機構名稱：_____		服務機構名稱：_____	
辦公地址及電話：_____		辦公地址及電話：_____	
住址：_____		電話：_____	

收入：必須根據申請人在申請日期之前十二個月所得總收入填報。收入包括薪金，僱主所給予的各項津貼、佣金、花紅、勤工獎、小賬、補薪、服務費、年終雙薪、教育福利、長俸、整筆付款或報酬、經商盈利、租金收益及其他收入。

- |                           |          |
|---------------------------|----------|
| (一)申請人全年的薪金及津貼            | \$ _____ |
| (二)申請人配偶全年的薪金及津貼          | \$ _____ |
| (三)子女及其他親屬全年津助家庭的款項等      | \$ _____ |
| (四)全年其他收入(說明：_____)       | \$ _____ |
| (五)全年總收入[(一)+(二)+(三)+(四)] | \$ _____ |

每月平均收入， 即全年總收入除以 12
\$ _____

公共援助：

申請人現正接受公共援助(高齡及傷殘津貼除外)

是 否

申請人已申請公共援助，結果未知

是 否

公共援助檔案編號：\_\_\_\_\_

家屬：只限於 ①申請人的配偶

②申請人的子女(包括本表申請助學金學生及申請人未滿十八歲子女  
或已滿十八歲但正接受全日教育的子女在內)

③倚靠申請人及/或其配偶供養的父母

姓名	學校、班級/職業	與申請人關係
1		配偶
2		
3		
4		
5		
6		
7		
8		

家屬總人數  
(不包括申請人)

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居所類型：私人樓宇 居屋 公屋

現時每月付出租金/購屋的分期付款	
<input type="checkbox"/> 租金	\$ _____
<input type="checkbox"/> 供款	\$ _____
<input type="checkbox"/> 自置	

此欄只供曾於上年度向本校申請而獲得資助的申請人填寫：  
過往資料

年 度	班 別	獲 批 類 別
		*膳費/其他： _____ *全免/半免

申請助學金類別：膳費/其他： \_\_\_\_\_

\* 刪除不適用部份

### 第三部：聲明

本人謹此聲明，以上各項資料俱屬實情。本人知道，貴校將根據上文所填報的資料，決定本人是否符合減免學費的申請資格。本人並明白，上述資料如有失實，本人的申請將不獲受理，本人亦須立即補交全部學費。本人特授權貴校向本人現時及以往的僱主，調查本人的收入詳情。現附上有關證明備查：

- 1.各家庭成員收入證明(影印本)共 \_\_\_\_\_ 份
- 2.租單(影印本)
- 3.購屋分期付款證明(影印本)
- 4.其他： \_\_\_\_\_

日期： \_\_\_\_\_ 申請人簽名： \_\_\_\_\_

### 第四部：本欄供班主任填寫

學生之表現：

品格： 樂於助人 ( ) 負責任 ( ) 勤奮好學 ( )  
          自私 ( ) 懶散 ( ) 不負責任 ( )

操行：( )

成績：級名次( ) 不及格科目( )

班主任之意見：

班主任簽名： \_\_\_\_\_

★ 本欄由助學金委員會填寫 ★

議決：該申請人之子女

- 符合助學金條例，核給助學金全免/半免 膳費津貼  
(由 20 年 月 日至 20 年 月 日)
- 不符合助學金條例，不核給助學金。

校長簽名： \_\_\_\_\_

年 月 日

# D13 True Light Middle School of Hong Kong Internal Subsidies Application Form

(20\_\_ -20 \_\_)

S\_\_\_\_\_ Name: \_\_\_\_\_(\_\_\_\_)

## Reminders:

1. The whole form should be filled in. If not applicable, please state clearly.
2. This form should be filled in by the parents of the student. If parents have passed away, the form should be filled in by the Guardian.
3. Parents or guardians are required to complete one form for one student.
4. Application should be made in September unless under special circumstances.
5. School has the right to investigate the information given. Home visiting may happen. The application qualification will be cancelled if there is concealment about the information.

## Part One: Student Information

English Name	Chinese Name	Class	School Entry Date

## Part Two: Applicant Information

Applicant's (Parent/Guardian) English Name	Applicant's Chinese Name	Spouse's English Name	Spouse's Chinese Name
HKID No.: _____ Relationship with Student: _____ Occupation & Position: _____ (if unemployed/ retired, since): _____ Name of the Organization: _____ Office Address & Tel: _____		HKID No.: _____ Relationship with Student: _____ Occupation & Position: _____ (if unemployed/ retired, since): _____ Name of the Organization: _____ Office Address & Tel: _____	
Address: _____			Tel: _____

Income: Please provide the income information of the applicant *since 12 months before this application.*

1. Income <sup>1</sup> of Applicant	\$ _____	Average Monthly
2. Income <sup>1</sup> of Applicant's Spouse	\$ _____	Income <sup>2</sup>
3. Subsidies from Children and Relatives	\$ _____	\$ _____
4. Other Incomes <sup>3</sup> (please specify: _____)	\$ _____	
5. Total Income [(1)+(2)+(3)+(4)]	\$ _____	

## Public Assistance:

Applicant is receiving CSSA<sup>4</sup>  Yes  No  
 Applicant is applying for CSSA<sup>4</sup> but the result has not yet been announced  Yes  No

CSSA<sup>4</sup> Reference No: \_\_\_\_\_

<sup>1</sup> Income refers to salary, all kinds of allowances/ subsidies given by the employer, commissions, bonuses, tips, overtime payments, educational benefits, pensions, remunerations, business profits, rental income and any other incomes *since 12 months before the application.*

<sup>2</sup> Total Income divided by 12

<sup>3</sup> It refers to the period of 12 months before the application.

<sup>4</sup> Comprehensive Social Security Assistance (excluding Old Age Allowance and Disability Allowance)

<sup>5</sup> Including the Student Applicant of this form and other children of the applicant who are full time students

Family Member(s):

Limited

to:

Spouse of the Applicant

Children of the Applicant<sup>5</sup>

Parents of the Applicant who depend on the Applicant for living

Name	School, Form/ Occupation	Relation(s) with Applicant
1.		Spouse
2.		
3.		
4.		
5.		
6.		
7.		
8.		
Total Number of Family Member(s): _____		

Accommodation  Private Housing  House Ownership  Public Building

Monthly Rent/ Installment of Mortgage:

- Rent \$ \_\_\_\_\_  
 Installment of Mortgage \$ \_\_\_\_\_  
 Owner of the flat

*Only for Previous Year's Applicants of Internal Subsidies:*

Pervious Information

Academic Year:	
Class:	
Approved Subsidies:	<input checked="" type="checkbox"/> Tutorial Fee/ Catering Fee/ Transportation Subsidies/ *Others: _____ <input checked="" type="checkbox"/> Free/ Semi-free*

*\* Please delete the inappropriate(s)*

Application Subsidy Category:

- Free/ Semi-free\*  
 Tutorial Fee/ Catering Fee/ Transportation Subsidies/ \*Others: \_\_\_\_\_

*\* Please delete the inappropriate(s)*

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regardless of the age of the student.

Part Three: Declaration

I declare that the information in this application and the supporting documents provided by me are true, complete and accurate. I understand that the school would make adjustment to the assistance level/ amount of financial assistance granted based on the information in which handed. I comprehend any misrepresentation, concealment of facts, providing misleading or false information will lead to disqualification, restitution in full of the assistance granted and possible prosecution. I commit to pay the total amount of tuition fee immediately upon request. I authorize your school to liaise with my present and past employers to verify and disclose the information provided by me. The following are the supporting documents enclosed as reference for this application:

- 1. Copies of income proof of applicant and other family members ( \_\_\_\_\_ copies)
- 2. Rent receipt copy
- 3. Documentary proof for mortgage
- 4. Others: \_\_\_\_\_

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

Part Four: To be completed by Class Teacher

Performance of the Student

Character: Helpful ( ) Responsible ( ) Studious ( )  
Selfish ( ) Lazy ( ) Irresponsible ( )  
Conduct: ( )  
Grade: Form Rank ( ) No. of Fail Subjects ( )

Class Teacher's Comment:

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Class Teacher's Signature: \_\_\_\_\_

★To be completed by the Subsidy Committee★

Score: \_\_\_\_\_

Category of Subsidies:

A	B	C	D	E	F
Free Tuition	Semi-free Tuition	free Catering	Semi-free Catering	Transportation	Others: _____

Decision:

- Application succeeded and the student is granted with \_\_\_\_\_subsidy in the amount of \$\_\_\_\_\_ (from \_\_/\_\_/\_\_\_\_\_ to \_\_/\_\_/\_\_\_\_\_ ).
- Application failed and no subsidy will be given to the student.

Yours faithfully,

\_\_\_\_\_  
Miss Hui Tuen Yung  
(Principal, TLMSHK)