Yan Chai Hospital Wong Wha San Secondary School

仁濟醫院王華湘中學

Application for Admission Application Guide

入學申請須知

1. When submitting an application, simply staple the following documents in the following order (DO NOT bound in form of a book or with a folder):

提交申請時,只需附上以下文件,並請依次排列及用釘書機釘好(毋須裝訂成書本形式或連同文件夾一併遞交):

- a. Admission Application Form 本校入學申請表
- b. Photocopies of the Academic Report Cards (previous 2 terms*) 過去兩年上下學期成績表影印本*
- * Bring the originals for verification purposes, without the originals, the copies MUST BE stamped by the school. Simply present your originals, DO NOT attach to the documents. Regardless the status of admission, once submitted documents will not be returned.
- *須帶同正本以作核對之用,如無正本,須在影印本上加蓋校印。正本只須於交表時出示,請勿夾附於遞交文件上,不論取錄與否,文件一經遞交概不奉還。
- 2. Applicants with good conduct and academic results will be notified by phone for the arrangements of the written tests and interview within two weeks. Those who perform satisfactorily in the written test will be notified for an interview. The written tests are set to assess the ability of the applicants in terms of Chinese, English and Mathematics. An individual interview, focusing on the applicants' ability to communicate will be conducted. Applicants who do not receive telephone notification within two weeks after the application date will be considered unsuccessful.

操行合符要求而學業成績較優之申請人將於兩星期內獲電話通知出席筆試,筆試表現合適的將 獲通知安排面試。筆試會考核申請人中、英、數的學習能力,而面試將以面談形式進行,着重 考生的溝通能力。申請日期後兩星期內未接獲電話通知者,則作落選論。

A notification will be sent to applicants with satisfactory performance in the written tests and interview.

在筆試和面試表現合符要求的申請人將獲通知到校辦理入學註冊手續。

3. Submission Period 繳交入學申請表時間

Monday to Friday 星期一至五 9:30am - 12:00nn / 2:30pm - 4:30pm Saturday 星期六 9:30am - 11:30am

- 4. Data (Privacy) Ordinance Statement 資料(私隱)條例聲明
 - a. The information collected in this form will only be used by our school for degree application.本表格所收集的資料,將只供本校用以辦理申請學位用途。
 - b. To ensure the protection of personal information provided by applicants, our school will destroy all information within three months after submitting the form. 為確保申請人所提供的個人資料得到保障,本校將於交表後三個月內將所有資料銷毀。

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Date Received 收表日期: / /	(Application No. 編號:)
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Yan Chai Hospital Wong Wha San Secondary School

仁濟醫院王華湘中學

Application Form for Admission

入學申請表

(/year 年度) (Level of Application 申請級別:S 中)								
Part 1 第一部份: Applic	ant's Informati	on 學生資料						
Name (in English) 英文姓名: Name(in Chinese) 中文姓名:								
HK ID No. 身份證號碼:	(上別:	Place of Birth 出生地點:				
	te of Birth 出生日期: <u>DD 日/MM 月/YY 年</u> Email 電子郵箱:							
Address 住址:								
Previous Schools Attended 過步								
Year 年度 Name of School 學校名稱					Class/Form 班別/年級			
Please attach additional infor	mation of the follo	owing if needed	1.以下各項市	可另外夾附資料	. 0			
Awards attained 曾獲校內及村	於外獎項:							
	1 1 1 1 1 1							
Please give reasons of choosing	our school 中請入	遺 半 仪原囚・						
Talents 特殊才能:								
Please provide information if th								
就讀本校的兄弟姊妹姓名及		-	•	ng at our school.				
Part 2 第二部份: Parent	/ Guardian Inf	ormation 家	長/監護	人資料				
Name (in English) 英文姓名				Chinese)中文姓名	í:			
Relationship with Applicant 與 Mobile Phone. No. 手提電話				マボン・				
Have you settled in Hong Kong					Please Select	 請剔選)		
Yes 是 / No 否								
If Yes, please select 如是,請易輸入內地人才計劃 (ASMT)					-			
+州/(「リンピ/(ノ」 ロー 単)(7 1011111		元日 田)(Teen II	15) / X E	others.				
School office dedicated 校								
☐ Not admitted 不取錄	Class 編入班別	House 編入社別	Interviewer	面試員姓名 Sig	nature 簽名	Date 日期		
□ Admitted 取錄								
		×		×				
For Office Use Only	由校方填寫							
申請確認回條 Confirmation Slip								
Name of Applicant 申請人	ame of Applicant 申請人姓名:Application Date 申請日期:							