# Yan Chai Hospital Wong Wha San Secondary School
## Application for S1 Discretionary Places (2027 - 2028)
## Application Guidelines

Attention

1. Our school will operate 4 classes of Secondary One in 2027 - 2028, and the number of Secondary One Discretionary Places available is **40**.
2. Admission criteria and weighting:

| | | | |
|---|---|---|---|
| • Academic Results | 25 % | • Interview Performance | 20% |
| • Conduct and Learning Attitude | 20% | • Prizes/Awards and Co-curricular Activities | 10% |
| • Rank Order List from the EDB | 20% | • Affiliation with the School* | 5% |

(*student whose parent(s) or sibling(s) are alumni of the School ; whose sibling(s) are studying at the School ; or student who is an immediate family member of any stakeholder of the School ; who is from primary schools under the same sponsoring body)

3. Application Period:

**4 January to 18 January 2027**

Monday to Friday: 9:00am – 12:00noon ; 2:00pm – 5:00pm

Saturday: 9:30am – 12:00noon

4. Application Fee: **Free**

Application Procedures

1. To obtain the application form of our school, applicants may
   a. Collect it at the General Office of our school
      * Address: No. 8 Tong Chun Street, Tseung Kwan O, N.T.
      * Telephone No. : 2706 0477

   b. Download it from our website
      * Website: www.ychwwsss.edu.hk

   c. For parents registered as SSPA e-Platform (eSSPA) users and bound their account with "iAM Smart+" may submit DP applications via the eSSPA or submit the paper version of the Application Form to the school.
      * Parents making applications via the eSSPA do not have to upload the paper Application Form for Secondary one Discretionary Places.

2. The following should be handed in to our school **IN PERSON**:
   i. A completed Application Form of our school
   ii. A completed Application Form for S1 Discretionary Place of the Education Bureau (EDB)
   iii. Photocopies of academic reports (Primary 5 and Primary 6) (if any)
   iv. Photocopies of supporting documents on competitions, activities and services (if any)
   v. Photocopies of supporting documents on prizes and awards (if any)
   vi. **TWO** stamped ($2.4) self-addressed envelopes (9" x 4")
   vii. A completed the Declaration Form on Collection and Use of Personal Data

   * Please produce the original copy of the applicant's identity document (e.g. Identity Card, Birth Copy Certificate or Passport) for verification.
   * ***Recommendation letter is NOT required.***
   * A copy of the "Parent's Copy" will be returned to the applicant upon receipt of the application.
   * The personal data collected will only be used for processing the application for S1 Discretionary places.

3. **ALL** applicants will be invited to attend an interview on **13 March 2027**. An interview notice will be sent to applicants in due course.
4. According to EDB, applicants should not apply for more than **TWO** secondary schools participating in the SSPA System.
5. Parents of successful applications will receive a notification from our school by letter and phone on **31 March 2027**. Please note that this notification may not be the final Discretionary Place application results under SSPA. Parents do **NOT** need to reply to the notification. The final Discretionary Places Allocation results will be released by the EDB together with the Central Allocation Results on **6 July 2027**.

# 仁濟醫院王華湘中學
## 中一自行分配學位 (2027 - 2028學年)
## 申 請 須 知

注意事項

1. 本校於2027 - 2028學年開設四班中一，自行分配學位共**40**個。

2. 收生準則及比重：

| | | | | | |
|---|---|---|---|---|---|
| 學業成績 | ： | 25% | 面試表現 | ： | 20% |
| 操行及態度 | ： | 20% | 獎項及聯課活動 | ： | 10% |
| 教育局成績次第 | ： | 20% | 與本校聯繫* | ： | 5% |

（*父母/兄姊為本校畢業生、兄姊為本校學生、直屬親系為本校持分者、小學為相同辦學團體）

3. 申請日期：

**2027年1月4日至1月18日**

星期一至五： 9:00am - 12:00noon；2:00pm - 5:00pm

星期六： 9:30am - 12:00noon

4. 報名費用：免費

申請程序

1. 申請者可透過下列方法，索取申請表格：
   (1) 於本校校務處索取
      * 地址：新界將軍澳唐俊街8號
      * 電話：2706 0477

   (2) 本校網頁下載
      * 網址：www.ychwwsss.edu.hk

   (3) 如家長已登記成為「中一派位電子平台」用戶並以「智方便+」綁定帳戶，除紙本申請表外，亦可透過「中一派位電子平台」遞交自行分配學位申請知。
      * 於電子平台遞交申請的家長毋須上傳《中一自行分配學位申請表》。

2. **親自交回**以下文件：
   (1) 本校「中一自行分配學位申請表」
   (2) 教育局「中一自行分配學位申請表」
   (3) 成績表影印本（小五全年及小六上學期）（如有）
   (4) 校內、校外比賽及活動或服務的證明文件副本（如有）
   (5) 獎項的證明文件副本（如有）
   (6) **兩個** 9吋×4吋 回郵信封(寫上學生姓名及地址，並貼上$2.4郵票）
   (7) 簽署個人資料收集及使用同意書

   * 申請者交表時須帶同***身份證明文件***正本(例如：香港身份證、出世紙、護照)，以核實資料。
   * ***申請者無須提交小學推薦信***。
   * 交表後，本校會給予申請人「家長存根」以確認申請。
   * 所有於申請程序中收取的個人資料，只用於與辦理申請入學有關之事宜。

3. **所有**申請者及其家長將被邀請參加面試，日期為**2027年3月13日**。學校將稍後專函通知申請者有關面試日期

4. 按教育局規定，每名小六學生在自行分配學位階段不可申請超過**兩間**參加「中學學位分配辦法」的中學。

5. 學校於**2027年3月31日**會透過書面及電話通知所有正取學生的家長，但家長毋須回覆通知。請注意，此通知並不一定等同中一派位的最終派位結果。學生最終的派位結果將於**2027年7月6日**由教育局與統一派位結果一併公布。

**Yan Chai Hospital Wong Wha San Secondary School**
**仁濟醫院王華湘中學**
**Application Form for S1 Discretionary Place (2027 - 2028)**
**中一自行分配學位申請表 ( 2027 - 2028)**

Applicant's Recent Photo
相片

Date Received 收表日期：____/____/_____ (Form No. 編號：_____ )

## Part 1 第一部份：Applicant's Information 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：_____(____) STRN 學生編號：_____

Sex 性別：_____ Date of Birth 出生日期：____DD 日/____MM 月/____YY 年

Place of Birth 出生地點：_____ Email 電子郵箱：_____

Address 住址 ：_____

Previous Schools Attended 過去三年曾就讀學校資料：

| Year 年度 | Name of School 學校名稱 | Class/Form 班別/年級 |
|---|---|---|
| 2024 - 2025 | | |
| 2025 - 2026 | | |
| 2026 - 2027 | | |

Please attach additional information of the following if needed.以下各項可另外夾附資料。

Awards attained 曾獲校內及校外獎項：

_____

Please give reasons of choosing our school 申請入讀本校原因：

_____

Talents 特殊才能：

_____

Information Technology (IT) skills 對資訊科技學習的興趣及能力：

_____

Please provide information if the applicant has siblings studied/studying or parents studied at our school: (Please state the year)
現就讀或曾就讀本校的兄弟姊妹或曾就讀本校的父母姓名及班別 (請註明年份)

_____

## Part 2 第二部份：Parent / Guardian Information 家長 / 監護人資料

Name in English 英文姓名：_____ Name in Chinese 中文姓名：_____

Relationship with Applicant 與學生關係：_____

Mobile Phone. No. 手提電話：_____ Tel. No. (Home) 住宅電話號碼：_____

## Collection and Use of Personal Data

**Purpose of Collection**

1. The personal data provided by you in this form will only be used by the School for processing related matters of the S1 Discretionary places for 2027 - 2028.

2. The provision of personal data required by this form and during the processing of this form is obligatory. In the event that the required personal data is not provided, we may not be able to handle or further process the form.

**Data User**

The personal data you provide will be made available to designated persons working in the School.

**Access to Personal Data**

You have the right to request access to and correction of the personal data held by the School. Request for access or correction of personal data should be made in writing to the School at Yan Chai Hospital Wong Wha San Secondary School, 8 Tong Chun Street, Tseung Kwan O, N.T. Hong Kong.

☐ I have read, understand and agree to the above terms and conditions.

| _____ | _____ | _____ |
|---|---|---|
| Name of Parent/Guardian | Signature | Date |

## 個人資料的收集及使用

**收集個人資料的目的**

1. 你在本表格提供的個人資料，只會供本校用於辦理 2027 - 2028 年度中一自行分配學位申請相關事宜。

2. 你必須按本表格的要求及於本校處理本表格的過程中提供個人資料。假如你沒有提供該等個人資料，本校可能無法辦理或繼續處理相關申請。

**資料使用者**

你提供的個人資料會供本校指定人員閱覽。

**查閱個人資料**

你有權要求查閱及更正本校所持有關於你的個人資料。如需查閱或更正個人資料， 請以書面向本校提出申請（地址：將軍澳唐俊街 8 號）。

☐ 本人已閱讀、明白及同意以上的條款及細則。

| _____ | _____ | _____ |
|---|---|---|
| 家長或監護人姓名 | 簽署 | 日期 |