

博愛醫院陳國威小學
2022/2023 年度小一候補生入學申請表格

中文姓名：_____

英文姓名：_____

教育統籌局註冊證編號：_____

報讀年級：_____

性 別：_____ 年 齡：_____



出生地點：_____ 出生日期：_____年_____月_____日

(*請選擇適用欄填寫)

*1. 出生證明書編號：_____ *2. 首次來港日期：_____

*3. 其他證件名稱：_____ 證件編號 _____

原讀幼稚園名稱：_____ 地區 _____ 原讀學校班別 _____

家長 / 監護人資料

中文姓名：_____ 英文姓名：_____

職 業：_____ 與學生關係：_____

地 址：_____

住宅電話：_____ 手提電話：_____

電郵地址：_____

家庭人數：兄____人、姊____人、弟____人、妹____人

自行分配學位階段所選之學校：_____

統一派位被派往學校：_____

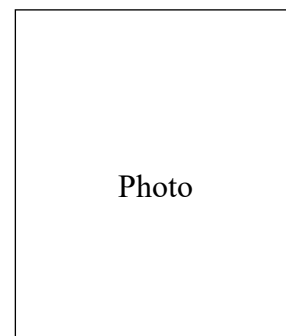
填表日期：_____ 家長 / 監護人簽署：_____

〈本部由學校填寫〉

申請日期		約見日期	
申請表編號		約見時間	
備 註			

Pok Oi Hospital Chan Kwok Wai Primary School
2022/2023 School Year
Primary One Alternate Student Application Form

English name: _____
Chinese name: _____
Number of the Primary One Registration Form: _____
The grade applying for: _____
Sex: _____ Age: _____
Place of birth: _____ Date of birth(DD/MM/YYYY): ____/____/____



(* Please fill in the appropriate items.)

*1. Birth certificate number: _____ *2. Date of first arrival in HK:: _____
*3. Other identity document: _____ The number of the identity document: _____
Name of the Kindergarten attended: _____
District: _____ The Grade attended in previous school: _____

Information of Parents / Guardian

Chinese name: _____ English name: _____
Occupation: _____ Relationship with the student: _____
Address: _____

Home telephone number : _____ Mobile phone number: _____

Email address: _____

Household size : Elder brother____, Elder sister____,
Younger brother____, Younger sister____

The school chosen in the Allocation of Discretionary Places:

Name of the school allocated:

Application date: _____ Signature of parents / Guardian: _____

〈 To be completed by the school 〉

Application date		Appointment date	
Application no.		Appointment time	
Remarks			