



聖公會靈風堂幼稚園
S.K.H. Holy Spirit Church Kindergarten

School Application Form

For School use

No.	2	0			
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Chinese Name				Photo
English Name				
Birth Cert. No.				
HKSAR Re-entry Permit No.				
Date of Birth				
Age		Gender		
Place of Birth				
Ancestral Home				
Address				
Telephone No.		Mobile		
Correspondence Address				
Father's Name		Occupation		Mobile
Mother's Name		Occupation		Mobile
Guardian's Name			Relationship	
Occupation			Contact No.	

Applying	AM/PM K1/K2/K3 from Sem 1/Sem 2 of the year 2019-2020			
Relatives studied/studying in our kindergarten		Class		
Previous School Name (If child is from mother's school)				
Reason for Application (If child is from mother's school)				

Date : _____ Parents/Guardian's Signature : _____

For School Use

Application Fee HKD \$ 40	Payee Signature :	Date :
Proof of Birth Cert	Original : Yes/No	Copy : Yes/No
Envelop (Five with stamps)	Yes/No	
Interview	Date: /Time:	/Teacher:

Submission date : _____ Receptionist Signature : _____

Notice : _____