

# Po Leung Kuk Lui Chan Wai Ching (Kwai Fong) Kindergarten-cum-Nursery Application Form of Admission

**Applied class:**  Pre- Nursery (2-3years old)       Kindergarten (3-5years old)

Application no: \_\_\_\_\_ Date of Application: \_\_\_\_\_(Date/Month/Year)

|  |        |                         |   |
|--|--------|-------------------------|---|
| Name in Chinese  |        | Name in English         |   |
| Date of birth  |        | Gender                  | <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Place of birth   |        | Document type & Numbers | ID / Others(Remarks):   |
| Email address  |        |                         |   |
| Address  |        |                         |   |
| Family members' information  | Father | Mother                  | Guardian (Please state the relationship with child)           |
| Name   |        |                         |   |
| Contact No   |        |                         |   |
| Intended Entry Date: _____(Month/Year) (If the admission is not able to arrange according to your intended entry date, it will automatically be transferred to the waiting list and continue to wait.)   |        |                         |   |
| How do you know our school: <input type="checkbox"/> Newspaper <input type="checkbox"/> Relatives <input type="checkbox"/> Website <input type="checkbox"/> Others : _____   |        |                         |   |
| <p>I understand that the information in the form is used to apply for the service. I can choose whether to provide the personal information in the form. I understand that the relevant information will be destroyed within 1 year after I no longer use it or wait for the service. In order to maintain relationship with you, please ensure that the information you fill in is sufficient and correct. Our school would be able to provide you with school trends, service promotion and fundraising activities through mail, email, telephone or SMS.</p> <p>I <input type="checkbox"/> agree /   <input type="checkbox"/> disagree to receive any information from Po Leung Kuk.</p> <p style="text-align: right;"><b>Signature of parents/ guardian:</b> _____</p> |        |                         |   |
| <p>The personal data collected in this form will be used by the school to consider students' admission and other direct related purposes. The data is only for Po Leung Kuk's internal use. According to The Personal Data (Privacy) Ordinance, you have the right to access and correct your personal data. If you have any enquiries, please contact our school.</p>   |        |                         |   |

**\* Parents must provide the relevant information above, otherwise the school will not be able to arrange your child for admission.**

|  |                |                        |   |
|--|----------------|------------------------|---|
| <b>The following information are filled by school:</b> |                |                        |   |
| Signature of Staff                                     | Received date  | Signature of Principal | Signature of Assistant Principal<br>Social Services Secretary |
|  |                |                        |   |
| Remarks  | Name of Staff: |                        |   |
| Date of notification of admission:                     |                |                        |   |
| Date of admission:                                     |                | Date of withdrawal:    |   |
| Reason of withdrawal:                                  |                |                        |   |