2026/2027 學年

## **Kiangsu & Chekiang Primary School**

## 蘇 浙 小

## Primary 1 Application Form 小一報名表

登記號碼 REGISTRATION NO:

					KEU	ISTRATION .	NO.	
姓名	中文 英文							
Name			In En	n English				
					電話			
住址					Tel. No:		照片	
Address								
7 Iddi C55							(正面半身近照)	
田笠	公田		毛光		今中帝田海	<u>~</u>	-	
國籍	籍貫	種族		家中常用語言		Photo		
Nationality:				: (e.g. Chinese)	1 <sup>st</sup> language:			
現正就讀的幼稚園	學校名稱				現正就讀的班級		(Head and Shoulders)	
Current Kindergarten	School Name:				Class/Level:			
出生日期	Ħ	 月	年	年齡	性別	M/F		
Date of Birth	DD	MM YYY		Age:	Sex:	M/F		
Bute of Birth	□香港	171171 111		1150.	□外地	請註明地	·□	
					Other Please Specify Country:			
	11 17							
	Hong Kong					O 香港以外地方出生證明書编號		
		證明書编號			Birth (	Certificate No.	(Issued Outside Hong Kong):	
	Hong Kon	g Birth Certifica	ite No:					
					│ ○ 護照编	〇 護照编號		
出生地點					Passport No.:			
Place of Birth						○ 香港身份證编號		
	〇 香港身份	<b></b>				Kong Identity	Card No ·	
		g Identity Card 1	No:			效身份證明		
	Tiong Kon	ig facility Cara i	110.					
						Valid Identity		
					编號N			
					O 到港日期(只適用於中國新移民) Arrival date from China:		於中國新移民)	
							ina:	
						1		
	家長	ne Parents		) 3	文親 Father		母親 Mother	
	a. 姓名 Name	中文						
		I. F1:-1.						
		In English:						
	b. 香港身份證	登编號						
	Identity Card N	lo.:						
	c. 教育程度:	小學/中學/大學	县					
家長或監護人	Education : Primary/Sec./Univ.: d. 職業							
》及與無受八 Parents/								
1	Occupation:							
Guardians	e. 辦事處地址							
	Office Address:							
	f. 辦事處電話	£						
	Office Tel. No:							
	g. 其他聯絡電話							
	Other Contact No:							
	監護人姓名(如適用)				職業		與學生關係	
	而吸入生石(如烟川) Guardian's Name (if applicable):			Occupation:		· ·	Relationship:	
1		•		*				
	香港身份證编號				電話			
	Hong Kong Iden	ntity Card No:				Tel. 1	No:	
	辦事處地址							
	Office Address:							
申請人正在本校就讀的兄弟姊妹								
Name of sibling(s) currently studying at KCS:					Class:			
申請人的父母/兄弟姊妹曾為本校舊生					年份/ 班别			
Name of sibling(s) or parent(s) who previously attended KCS:					Year/ Class:			
申請人的父母為本校教職員							ass.	
Name of parent(s) work	ting at KCS:						D.1	

家長應將表格各項詳細填明,並帶同下列各文件於 2025年9月1日 至30日,(星期一至五:上午 九時至下午四時;星期六:上午九時至下午一時)親臨本校把有關文件(放入公文袋)投入收集箱內: Parents should read and complete this form carefully and deposit all the documents in the School's Dropin box which is provided at the main entrance with an envelope from 1st September 2025 to 30th September 2025 during office hours (Mon-Fri:9am-4pm; Sat: 9am-1pm) together with: 報名費港幣 50 元(只接受支票) 劃線支票抬頭:蘇浙小學 (請在支票背面寫上學生姓名) Application fee of \$50 (Cheque only). Cheque payable to "Kiangsu & Chekiang Primary School" (Please write your child's name on the back of the cheque.) 申請人如在香港出生,請提交出生紙及香港身份證(副本) (B) For applicants born in Hong Kong: Please bring a copy of their birth certificate and Hong Kong 報名須知 Permanent Identity Card (if any). Notes to **Applicants** 申請人如在外地出生,請提交外地出生證明書;如申請人已領取香港身份證、護照或其他 (C) 類別之有效身份證明文件 ( 如簽證身份書、單程通行證、回港證等 ) (副本),**護照副本必須** 包括由香港入境事務處發出之在港居留許可證 For applicants born outside Hong Kong: Please bring a copy of their birth certificate issued outside Hong Kong, passport, Hong Kong Identity Card or valid identity document(s) (e.g. Document of Identity, One Way Chinese Exit Permit, Re-entry Permit, etc), Please include the page with document(s) provided by the Immigration Department showing the permit to stay in Hong 如遞交參考資料,本校只接受纸張文件,A4 纸雙面不超過 4 張 (D) For applicants who wish to submit references etc., please note that only paper documents (A4 paper; 4 double-sided sheets) will be accepted. (E) 幼稚園 K1 和 K2 成績單或其他證明文件(副本) Copies of K1 and K2 school reports from previous schools and other relevant certificates. 三個已填妥學生姓名及地址的信封(11厘米 x 24厘米),並貼上\$2.2的郵票 (F) Three envelopes (size 11cm x 24cm) with the applicant's name and address. Please put on a \$2.2 stamp on the envelopes. 所需文件不足,恕不接受報名。 (G) Applications without any of the above necessary documents, will not be accepted. 約見日期: 2025年10月18日(星期六),時間詳見約見證 Interviews will be held on 18th October 2025(Sat), please see details on the Interview Card. 本校將於面試後兩星期內發函通知面試結果 All applicants will be informed of their results within 2 weeks. 藉本申請表格提供的個人資料,乃為處理及審核閣下子女入學申請之用。有關資料只會因應與處理及審核閣下子女入學申請有關的用途或在法律允許的 情況下供本校的職員加以使用、披露或轉移。如閣下未能提供本申請表格索取的資料可能導致本校未能處理閣下子女入學申請。若閣下子女入學申請成 功獲本校接納,本校將把有關資料存檔作學生記錄並因應與處理學生事務有關的用途或在法律允許的情況下供本校的職員或服務供應商/代理人/承包商 加以使用、披露或轉移。閣下有權要求查閱及更改閣下向本校提供並由本校持有的個人資料。閣下須以書面向本校秘書(地址:香港北角清華街30號或電 郵:enquiry@kcs.edu.hk)提出上述要求。 The personal data to be supplied to this application form is for the purpose of processing your application for admission and will be used by, disclosed to or transferred among our employees only for purposes related to the process of your application for admission or where permitted by law. Failure to provide information requested under this application form may result in us being unable to process your application for admission. Should your application for admission be successful, the personal data may be retained as part of the student's records maintained by us and may be used by, disclosed to or transferred among our employees or agents/contractors/service providers for the administration of the affairs of the student or where permitted by law. Request access to and correction of the personal data provided by you and held by us may be made in writing to the school secretary at 30 Ching Wah Street, North Point, Hong Kong or emailed to enquiry@kcs.edu.hk. 本人聲明 I declare 本人為上述申請人的家長/監護人 I am the parent/guardian of the above mentioned applicant. 本人已明白此表格提供的個人資料的用途 I understand the purposes of which the personal data provided by means of this form will be used. 此表格内的資料全屬正確無訛,倘若有虚報資料,本申請則作廢 To the best of my knowledge and belief, the information contained in this form is true and correct. If false information is supplied, this application will be instantly rendered null and void. 家長/監護人簽署 Signature of Parent/Guardian: 家長/監護人姓名 日期 Name of Parent/Guardian: Date:

以下由本校招生委員會填寫

THIS PART TO	BE COMDI	ETED BY	V THE C	CHOOI

THIS PART TO BE COMPLETED BY THE SCHOOL						
	入學面試成績	備註				
	Result:	Remarks:				
會見紀錄						
Interview Record	報名日期	經辦人				
	Date of Registration:	Accepted by:				