

香港聖公會福利協會有限公司

香港聖公會聖西門良景幼兒學校

入學申請表

申請編號： _____

報讀班別： 預備班 幼兒班 低班 高班 其他： _____

入學原因： 子女適齡入學

其他： _____

幼兒資料

幼 兒 姓 名	中文：	英文：			相 片
出 生 地 點		出 生 日 期		年 齡	
出 世 紙 編 號				性 別	
通 訊 地 址 (中 文)					
(英 文)					
電 郵 地 址 (如 有)				電 話	

	父 親	母 親	或 監 護 人
姓 名 (中)			
(英)			
職 業			
電 日 間			
話 手 提 電 話			

其他同住成員	性別	年齡	與申請人關係	職業	學校及班別

其他補充(請註明)： _____

有關個人資料使用同意書，請參閱背頁。

申請人簽署： _____ 日期： _____

如學生獲錄取，請家長或監護人填寫以下資料

	父 親	母 親	或 監 護 人
身 份 証 號 碼			

以下由校方/中心填寫

收表日期		入學日期		離校日期	
備 註					

香港聖公會聖西門良景幼兒學校

個人資料使用同意書

本人明白校方/中心將收集本人及小兒/女之個人資料，作為有關申請服務的用途。協會可將本人的個人資料，包括但不限於姓名、電話號碼、傳真號碼、電郵地址、郵寄地址等，向工作上有需要知道該等資料的協會職員及義工、協會轄下相關部門及單位、獲授權或有法定權力收取有關資料的政府部門或機構、及獲協會委任的保險公司、醫生、法律顧問及/或其他服務提供者等轉移及披露。有關的個人資料將按《個人資料（私隱）條例》處理，不會以任何形式出售、租借或轉讓予任何人士或組織。

本人明白提供個人資料予校方/中心純為自願。若本人未能提供足夠個人資料，協會可能無法處理有關服務的申請而導致校方/中心未能提供服務，或引致服務提供之延誤，需由本人負責。本人亦明白需確保所提供之資料為真確。遇有任何資料上之更改，本人須儘快通知校方/中心更新，否則，如因所提供的資料失誤而引致服務提供之延誤，概由本人承擔。而本人提供之資料當中如涉及其他人士，本人已取得該人之同意。本人亦知道所提供之個人資料將於服務終結後的第二年銷毀。

除個人資料(私隱)條例特定的豁免範圍外，本人有權透過申請，查閱及/或改正學校/中心所存有關本人的個人資料，本人明白如需「查閱個人資料」或「索取個人資料的複印本」，均須於提交申請表時，繳付初步處理費港幣 70 元正。如需取得一份有關資料的複本，則須於領取資料複本時，繳付黑白影印費每頁港幣 2 元正。如有查詢或提出申請，可聯絡本校/中心，

地址：屯門良景邨良智樓地下 9-16 號 聯絡電話：2464 6939

對於協會可能會使用你的個人資料與你聯繫、發送資訊，及以作服務推廣及宣傳、籌募、義工招募、意見收集和其他與協會有關活動之用途。如你不同意，可在簽署前於下欄加上「✓」號表示。

本人反對香港聖公會福利協會有限公司將本人的個人資料作上述用途。

若你要求協會停止使用你的個人資料作上述用途，可隨時致函「屯門良景邨良智樓地下 6-16 號 香港聖公會聖西門良景幼兒學校」。

家長/監護人簽署	：	_____	負責職員簽署	：	_____
家長/監護人姓名	：	_____	負責職員姓名	：	_____
香港身份證號碼	：	_____	負責職員職位	：	_____
日期	：	_____	檔案編號	：	_____

Hong Kong Sheng Kung Hui Welfare Council Limited
 Hong Kong Sheng Kung Hui St. Simon's Leung King Nursery School

Application Form

Class : Nursery K1 K2 K3 Other: _____ Application No. : _____

Reason for application : Proper age to study

Other : _____

Child information

Name	Chinese :	English :				Photo
Place of Birth		Date of Birth		Age		
Birth Certificate / Passport No.		Nationality		Sex		
Home Address (Chinese)						
Home Address (English)						
Email Address (if any)				Tel.:		

	Father	Mother	Or Guardian
Name (Chinese)			
Name (English)			
Occupation			
Tel. (Daytime):			
Tel. (Mobile):			

Family Members	Sex	Age	Relationship with Applicant	Occupation	School & Class

Other information(Please specify, if any) : _____

Please refer to the policy of personal data collection overleaf.

Signature : _____

Date : _____

If the child is enrolled in our school, please fill in the information below.

	Father	Mother	Or Guardian
ID Card No.:			

For school use only

Date of collection:		Date of admission:		Date of withdrawal:	
Remarks					

Hong Kong Sheng Kung Hui St.Simon's Leung King Nursery School
Letter of Consent to Use of Personal Data

I understand that Hong Kong Sheng Kung Hui St. Simon's Leung King Nursery School ("the School") of Hong Kong Sheng Kung Hui Welfare Council Limited ("the Council") will collect my / my child's personal data for processing my application for the related services. The Council may disclose and/or transfer my personal data including but not limited to my name, telephone number, fax number, email address and mailing address where applicable, to the staff and volunteers who will have access to the information on a need-to-know basis, other units and/or centres of the Council , and party authorized or required by law, and external parties who are authorized and/or appointed by the Council including but not limited to doctors, insurance companies, government departments, legal advisors, and /or other service providers. My personal data will be treated as strictly confidential in accordance with the Personal Data (Privacy) Ordinance, and will not be sold, traded or rented in any form through any means to any other parties.

I understand that the personal data is provided on a voluntary basis. Failure to supply such data may result in the School (or the Council) being unable to process my application or to provide the service requested. I shall be responsible for the delay of processing of my application or provision of service, if any, arising from my failure to supply any of the personal data required. I understand that I have to ensure the accuracy of all the personal data I supplied. I shall notify the School and/or the Council of any change of the personal data or any part thereof as soon as possible. I understand and agree that I shall be responsible for delay of service due to any inaccurate or incomplete personal data. I understand that if any personal data of my family/children/relatives or friends are provided, I shall obtain the necessary prior consents before providing such data. I understand that the personal data will be erased on the second year after the end of service.

Save and except the circumstances specified under the Personal Data (Privacy) Ordinance, I understand that I have the right to apply for access and/or correction of the personal data held by the Council and the initial handling fee for such application and photocopy fee are \$70 and \$2/sheet respectively. For application or enquires, I may contact the person in charge of the School. Particulars of the School are as follows:

Address: No. 9-16, G/F, Leung Chi House, Leung King Estate, Tuen Mun.

Telephone: 2464 6939

The Council will utilize your personal data for communicating with you, delivering news information, and for the purposes of service promotion, fundraising, volunteer recruitment, conducting surveys and other activities associated with the Council.

Should you find the use of your personal data not acceptable, please indicate your objection before signing by ticking the box below.

I object Hong Kong Sheng Kung Hui Welfare Council Limited to use to my personal data for the purposes stated above.

Upon your request in writing to Hong Kong Sheng Kung Hui St. Simon's Leung King Nursery School, we will cease to use your personal data for the above purpose.

Signature of applicant: _____

Signature of staff: _____

Name of applicant: _____

Name of staff: _____

HKID No. of applicant: _____

Position of staff: _____

Date: _____

Case No.: _____