



YAN OI TONG TIN KA PING PRIMARY SCHOOL APPLICATION FORM

PHOTO

NAME OF STUDENT : (ENGLISH) _____

(CHINESE) _____

DATE OF BIRTH : ____/____/____ (dd/mm/yy) AGE : _____ SEX : _____

ADDRESS : _____

CONTACT NO.: (DAY) _____ (NIGHT) _____

SCHOOL CURRENTLY STUDYING : _____

SCHOOL ADDRESS: _____

CLASS CURRENTLY ATTENDING : _____ CLASS APPLYING FOR : _____

NAME OF GUARDIAN : _____ AGE: _____

OCCUPATION OF GUARDIAN: _____ RELATIONSHIP: _____

OFFICE ADDRESS: _____

OFFICE PHONE NO. _____ E-MAIL: _____

INFORMATION OF SIBLING

	NAME OF SIBLING	AGE	CLASS	NAME OF SCHOOL
1				
2				
3				

ACHIEVEMENT (*Please attach a separate sheet if necessary)

YEAR	ACHEIVEMENT ATTAINED	ORGANIZATION

SKILLS : _____

NOTE :

- 1) Please attach copies of two latest academic reports, student's birth certificate, relevant certificates and a stamped addressed envelope.
- 2) After completing the application form, please send to 3 TONG CHUN ST., TSEUNG KWAN O., HONG KONG.