



齋色園主辦可譽中學暨可譽小學
法團校董會



The IMC of Ho Yu College and Primary School
(Sponsored by Sik Sik Yuen)

大嶼山東涌健東路 4-6 號

4-6 Kin Tung Road, Tung Chung, Lantau Island, N.T.

電話/Tel: 2109 1001 傳真/Fax: 2109 2002

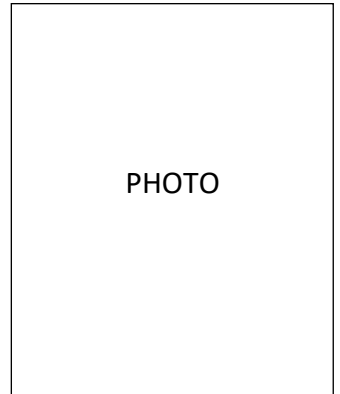
網址/Website: <http://www.hoyu.edu.hk>

Application form for Secondary One Discretionary Places (2023/2025)

Office Use Only:			
Application No.:		Apply for (School Year)	2025-2026
Teacher's Name:		Apply for (Level)	Secondary One
Teacher's Signature:		Approved by Principal:	

Please attach the following documents when sending or handling in the form:

- (1) Application Form for S.1 Discretionary Place issued by the EDB
(Our school code is 505)
- (2) Photocopies of P.5 (First and Secondary Term) and P.6 (First Term)
school report cards)
- (3) A photocopy of a document showing the residential address (e.g.
electricity /water / telephone bill / bank statement)
- (4) A photocopy of applicant's identity card or birth certificate
- (5) TWO self-addressed stamped (\$2.2) envelope
- (6) One recent photo



Please complete Parts A, B and C in **BLOCK** letters.

Part A: Applicant's Particulars

Name: (In English) _____ (In Chinese) _____ Sex: _____

Date of Birth: _____(yyyy)_____(mm)_____(dd) Age: _____ Nationality: _____

Place of Birth: _____ Student Reference Number (STRN): _____

Hong Kong Birth Certificate Number: _____

(OR: *Hong Kong Identify Card/Permit to remain in the HKSAR / Valid Travel Document Number:

_____)

Residential Address:

(in English) _____

(in Chinese) _____

For non-Tung Chung resident, please specify the estimated date moving into Tung Chung: _____

Residential Telephone Number: _____

*Please delete as appropriate

P.T.O



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Education History:

Name of School (Please specify the Country if outside Hong Kong)	From (yy-mm-dd)	To (yy-mm-dd)	Class Attended/Attending
			to
			to

Part B: Siblings In Ho Yu

Student's Name				
Class Attended / Attending				

Part C: Parent's or Guardian's Particulars

Name: (In English) _____ (In Chinese) _____ Sex: _____

Hong Kong Identify Card Number: _____ Age: _____ relationship: _____

Residential Address: *(If different from student's)*

(in English) _____

(in Chinese) _____

Contact Telephone Number: (Home) _____ (Office) _____ (Mobile) _____

Parent's or Guardian's Signature: _____ Date: _____

The information collected above is solely for the purpose of school places application.