· ±	編號	NI.	•
否	絤弧	INO.	•

日期 Date:_____



西貢崇真天主教學校(中學部) SAI KUNG SUNG TSUN CATHOLIC SCHOOL (SECONDARY SECTION)

入學								
□ 中一 S	相片							
甲) 學生資料 Student Particula	Photo							
姓名(正楷書寫)								
Full Name								
(in Block Letters) (中文)(In	(英文)(In English) 電話號碼 Phone No.							
香港身份證 / 旅行證件號碼 HKID / Travel Document No.	电话號為 PHONE NO.							
出生日期	性別	· 手提	住宅					
Date of Birth	Sex	Mobile	Home					
出生地點	年齡	宗教	國籍					
Place of Birth	Age	Religion	Nationality					
通訊地址								
Correspondence Address								
是否有親屬現正或曾經就讀本校 Any Relatives Currently or Previously Studying at the School *□有 Yes / □沒有 No								
如有,請列明親屬的姓名、就讀班別或畢業年份: If yes, please list their names, classes or graduation years:								
*請於適當□內填上剔號✓ Please put a	tick ✓ in the approp	oriate box						
乙) 就學資料 Education Inform	ation (按日期順	i序列出) (in Chronolog	gical Order)					
日期 Date (月/年) (MM/YY)		就讀學校名稱	,	就讀班級				
由 From 至 To	Na	me of the School Attended		Grade				
(如有需要請另紙書寫 Use a Separate Sheet if Necessary)								
曾獲取之獎項或獎狀								
有複單之契模或契款 Awards or Certificates Received								
	•							
两) 監護人資料 Guardian Parti 姓名(正楷書寫)	culars							
Full Name (in Block Letters)								
	(中文)(In Ch		(英文)(In E	English)				
與學生之關係		電話號碼 Phone No.						
Relationship to Student		1 la	40					
職業	手提 Mobile	住宅 Home						
Occupation Mobile Home 通訊地址(同上不用填寫)								
Correspondence Address (no need to fill in if same as above)								
1		<u>'</u>						
監護人簽署		_	a the To it is					
Signature of Guardian: 日期 Date:								
***交回申請表時,請附上以下文件之		ch copies of the following	documents:					
(1) 香港身份證 HKID Card (2)	近2年之成績表	、獎項及/或獎狀 Schoo	ol Report Card, Av	vards and/or				
(1) 香港身份證 HKID Card (2) 近 2 年之成績表、獎項及/或獎狀 School Report Card, Awards and/or Certificates from the Past Two Years (3) 領洗紙 (如適用) Baptismal Certificate (if applicable)								
收集個人資料聲明 PERSONAL INFORMATION COLLECTION STATEMENT								
1. 本表格所收集的個人資料將用作	處理入學申請。 on this form will be	used for processing admissi	on applications					
The personal information collected on this form will be used for processing admission applications. 2. 若學生獲學校取錄,學校會妥善保存此申請表。								
If the student is admitted, the school will properly preserve this application form.								
校方填寫 For School Use Only								
2. 結果 Result: □ 取錄 Admitted / □	小 ア 収錄 Not Adm	nitted 玛玛 Class	四社	House				

負責老師簽署 Signature of Teacher :_____

西貢崇真天主教學校(中學部) 收集申請人/學生個人資料聲明

收集目的

- (1) 本校將使用報名表上的個人資料進行學位甄選工作,並在有需要時與申請人聯絡。
- (2) 在報名表上填報個人資料純屬自願性質。

資料傳交

(3) 為作上文第(1)段所述的用途,報名表所載的資料除供本校內部之用外,部份資料將會上傳與教育局學位分配組使用。

查閱個人資料

(4) 根據《個人資料(私隱)條例》(香港法例第 486 章) 規定,填報這份報名表的人士有權查閱和更正提供的個人資料,包括索取報名表內有關個人資料的副本。申請人提供資料將保密處理並將於學期末銷毀。

查詢

(5) 如對在這份報名表內填報的個人資料有任何查詢,包括查閱及更正資料,請與本校聯絡。

地 址: 新界西貢普通道

電話號碼: 2792 6712 傳真號碼: 2791 0401

電 郵: sts-mail@hkedcity.net

Sai Kung Sung Tsun Catholic School (Secondary Section) Applicant's/Student's Personal Data Collection Statement

Purpose of Collection

- (1) The school will use the personal data provided in the application form to process school place application and will contact the applicant when necessary.
- (2) The personal data in the application form is provided on a voluntary basis.

Transfer of Data

(3) Apart from the purpose stated in (1) above, part of the personal data provided in the application form will also be sent to the School Places Allocation Section of the Education Bureau.

Access to Personal Data (4) According to the Personal Data (Privacy) Ordinance Cap. 486, a data subject has the right to request access and correction to the personal data provided in the application form, including obtaining a copy of it. The data provided by an applicant will be kept confidential and destroyed at the end of a school year.

Enquiry

(5) Please contact the school should there be any enquiries regarding the personal data provided in the application form, including data access request or correction of data.

Address : Po Tung Road, Sai Kung, New Territories

Telephone: 2792 6712

Fax: 2791 0401

Email: sts-mail@hkedcity.net