

Tsung Tsin Mission Graceful Kindergarten (Ma On Shan)

Application Form for K1-K3

Date Received :

Application No. :

Student Information					
Name in Chinese		Sex		Photo	
Name in English		Nationality			
Date of Birth		Age			
Birth Certificate No.		Place of Birth			
Address					
Parent Information					
Name of father :				Mobile Phone No.	
HKID No. :			(first 4 letters and digits)	Occupation	
Name of mother :				Mobile Phone No.	
HKID No. :			(first 4 letters and digits)	Occupation	
Home Tel No.		Religion		Name of Church	
Email Address					
Apply for	<input type="checkbox"/> K1 (AM) <input type="checkbox"/> K1 (PM)				
	<input type="checkbox"/> K2 (AM) <input type="checkbox"/> K2 (PM)				
	<input type="checkbox"/> K3 (AM) <input type="checkbox"/> K3 (PM)				
Siblings studying in our school	Name :		Class :		
Name of Previous School					
Remarks					

Parent Signature : _____

Office Use Only					
<input type="checkbox"/> Application fee	<input type="checkbox"/> Registration fee	<input type="checkbox"/> Books and miscellaneous fee	<input type="checkbox"/> Uniform / School bag	<input type="checkbox"/> Registration Certificate	Enrollment Date _____