



# 綠楊幼稚園暨幼兒園

LUK YEUNG KINDERGARTEN AND CHILD CARE CENTRE

No: \_\_\_\_\_

新界荃灣綠楊邨綠楊坊平台 2 樓 S30

Unit S30, 2<sup>nd</sup> Floor, Luk Yeung Galleria, Tsuen Wan, N.T.

## APPLICATION FORM

Please complete in BLOCK LETTERS

## 申請表

請用正楷填寫

中文姓名

出生證書編號

Name in Chinese: \_\_\_\_\_ Birth Certificate No: \_\_\_\_\_

英文姓名

Name in English: [Surname] \_\_\_\_\_ [Given] \_\_\_\_\_

性別 男 M  出生日期   
Gender: 女 F  Date of Birth:   
D 日 D M 月 M Y 年 Y

相片  
PHOTO  
40mm x 50mm

出生地點

Place of Birth: \_\_\_\_\_

國籍

Nationality: \_\_\_\_\_

語言

Language[s]: \_\_\_\_\_

住址 [中文]

Address: [in Chinese] \_\_\_\_\_

[英文]

[in English]

住址電話

Home Tel: \_\_\_\_\_

請列出曾就讀學校資料

Please list playgroup, pre-school, or current school experience:

Start Date	入學日期	End Date	離校日期	Class	級別	School	學校

請選擇投考班級

Please rank preferences by [1] first choice and [2] second choice in the same level only:

上午班

下午班

Morning Session

Afternoon Session

9:00 am – 11:45 am	<input type="checkbox"/>	N1	<input type="checkbox"/>	1:30 pm – 4:15 pm
9:00 am – 12:00 pm	<input type="checkbox"/>	K1	<input type="checkbox"/>	1:30 pm – 4:30 pm
8:45 am – 12:00 pm	<input type="checkbox"/>	K2	<input type="checkbox"/>	1:15 pm – 4:30 pm
N/A	<input checked="" type="checkbox"/>	K3	<input type="checkbox"/>	1:15 pm – 4:40 pm

Please complete in BLOCK LETTERS

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Name in English: [Surname] \_\_\_\_\_ [Given] \_\_\_\_\_

申請人曾於本校就讀之父母或親兄弟資料

Parents and/or siblings whom previously studied at Luk Yeung Kindergarten and Child Care Centre:

Name in Chinese and English 中英文姓名	Gender 性別	Graduation Year 畢業年度	Relationship 關係

兄弟姊妹現讀於本校

Siblings who are currently attending Luk Yeung Kindergarten and Child Care Centre:

Name in Chinese and English 中英文姓名	Gender 性別	Class 級別	Relationship 關係

Father

父

Mother

母

家長中文姓名

Name in Chinese: \_\_\_\_\_

家長英文姓名

Name in English: \_\_\_\_\_

職業

Occupation: \_\_\_\_\_

公司名稱

Company Name: \_\_\_\_\_

公司地址

Company Address: \_\_\_\_\_

辦公室電話

Office Tel: \_\_\_\_\_

手提電話

Mobile No: \_\_\_\_\_

電子郵箱

e-mail: \_\_\_\_\_

Office Use:

學校使用

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