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YMCA of Hong Kong Christian College Fee Remission Scheme 2022/23

港青基信書院學費減免計劃

字頁减光計劃 Application Form

- 1	OFFICE USE ONLY Application No.:
	Received on:

Part I Check the Appropriate Boxes

Name of Student(s): 1	Class:	Class No.:
	2	Class:	Class No.:
	3	Class:	Class No.:
Please follow the instructi			form. Please put a "tick" on each appropriate box.
Category:		Supporting document(s) n	
☐ Category 1:	☐ A copy of each family r	nember's HK identity document living in	
SFO		y Certificate issued by Student Financial C	
☐ Category 2: CSSA	A copy of Notification 1 (1 April 2021 – 31 Mar	,	Assistance (CSSA)
☐ Category 3:		nember's HK identity document living in	the same house
Means test	All bank account record (1 April 2021 – 31 Marc	ds of applicants and family members	
i) For special situation only ii)All applicants should applied for SFO first	☐ Tenancy Agreement (For (If applicable) Copy of ☐ (If applicable) Copy of	or families living in public housing) supporting documents for separation / divorting documentary proof on unavoidable medinently incapacitated) for the period from 1 (2021 – 31 March 2022) Salaried employed person 1. Tax Demand Note issued by Inland	ical expenses (for family members who are April 2021 to 31 March 2022
	Self-employed driver or person running business (including sole proprietorship business / partnership business / limited company) Salaried employed or self-	not available 2. Employer's Return of Remuneration available 3. Salary Statement; if not available 4. Bank transaction records showing pallowance, etc.(together with the pabank account holder)(Please highling and remarks. For any entries other make necessary remarks next to the include the amount in calculating favailable 5. Income Certificate certified by the application form). 1. Profit and Loss Account verified by Accountant; if not available 2. Profit and Loss Account prepared of the application form available 3. Personal Assessment Notice (if applications for the properties of the profit and Loss Account prepared of the profit	payment of salary, age showing the name of ght the entries with colour than income, please also em, or else the YHKCC may amily income); if not employer (Appendix A of a Certified Public on your own and blicable).
	employed person who cannot produce any income proofs Landlord with rental income	Breakdown detailing the monthly inco explaining why income proof (YHKCC reserves the right to decide those applicants who cannot provide ju income proof would be accepted.) 1. Tenancy Agreement; if not available 2. Bank transaction record showing rethe page showing the name of bank highlight the entries with colour an other income, please also make neethem, or else YHKCC may include family income).	me throughout the year and cannot be produced. whether applications from stification for not producing lee antal income (together with account holder) (Please d remarks. For any entries essary remarks next to

All the categories must complete this form



YMCA of Hong Kong Christian College 2 Chung Yat Street, Tung Chung, Hong Kong. Tel: 29888123 Fax: 29882000

Deadline for Application: 9th September, 2022

Part II Particulars of Family Members Living in the Same House

- Please write in **BLOCK LETTERS**. Please provide information on your occupation and relevant income and those of your family member(s) during the period from 1 April 2021 to 31 March 2022.
- If you / your family member(s) has retired, was unemployed or was a student or a housewife during the period, please specify the status and relevant duration. Additional sheet may be added if there is insufficient space to provide the information.

	Applicant (Guardian)	Spouse	Family members (Student)	Family members
Name in English (According to HKID Card / Passport)				
Name in Chinese				
HKID Card No.	()	()	()	()
Date of Birth (dd/mm/yy)				
Relationship		* If your spouse is deceased, divorced or separated from you, please tick ✓ this box.		
Address				
Home Telephone No.				
Mobile Phone No.				
	1.	1.		
Name of Bank and Bank Account No.	2.	2.		
Bank Account No.	3.	3.		
Occupation				
Company Name				

Annual Income (1/4/2021-31/3/2022)	\$	\$	\$	\$
Other income:				
Stock dividend, Fixed				
deposit, Foreign	\$	\$	\$	\$
currencies, Rental				
income, other(s)				
Sub-total amount :	(a) =	(b) =	(c) =	(d) =

Total amount = (a) + (b) + (c) + (d) =

Part III Other Financial Assistance from Government / Other Organisation in academic year 2022-23

Please indicate if your family will receive any financial assistance from the government / any organization in the <u>current</u> academic year.

Type of Assistance	Eligibility	Supporting Document
Financial Assistance Scheme from SFO (such as textbook allowance, travel subsidy etc.)	*Full / Half grant	Yes / No
Comprehensive Social Security Allowance (CSSA)	-	Yes / No
Others: (please specify)		Yes / No

Part IV Medical Expenses Incurred by Family Member(s) with Chronic Illness (Please provide a copy of supporting document)

Name	Name of incapacity of Chronic Illness	Medical expenses incurred within the assessment period (\$)

Part V Other Special Family Informati	tion	forma	lnf	ly]	'amil	IJ	pecia	er S	Ithe	(t V	Part	J
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e	lease fill in other information that may assist in assessment, such as special financial hardship / incurred medical spenses for family members who are permanently incapacitated, any member who is <u>not</u> a self-bearing child of yours, to. Additional sheet may be added if there is insufficient space to provide the information.
	Additional sheet may be added it there is insufficient space to provide the information.
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Part VI Declaration

I hereby declare that:

- (a) The information in this application and the supporting documents provided by me and my family members are true and complete. The dependent parent claimed by me in this application means any of the applicant's parents, including in-laws, who is not a recipient of the Comprehensive Social Security Assistance. They must, throughout the assessment year (1 April 2021 to 31 March 2022), meet any one of the following conditions for a continuous period of not less than 6 months.
 - (i) has resided / been residing with the applicant's family and supported by the applicant or his/her spouse; or
 - (ii) has taken up permanent residence at another premises owned or rented by the applicant (i.e. Name of the applicant and / or his/her spouse should be shown on the relevant lease documents); or
 - (iii) has been living in his/her own premises, rented premises or residing in elderly homes and is totally supported by the applicant.

Remarks: Applicant or his/her spouse should continue to support their parents in 2022 /23 school year, and the level of support should be similar to that in the year of assessment.

- (b) I understand and consent that (i) the YMCA of Hong Kong Christian College (YHKCC) will assess the eligibility and assistance level of my family based on the information provided by me and the total number of applicants in the year; and (ii) every year the YHKCC will select a number of successful applications for counter-checking including home visits. If selected, I and my family members will fully cooperate with staff of the YHKCC; and (iii) the YHKCC may make adjustment to the assistance level awarded based on the findings of authentication. Any misrepresentation and concealment of facts or intentional obstruction of the YHKCC staff in their course of investigation will lead to disqualification, restitution in full of the assistance granted and possible prosecution; and (iv) all documents related to this applications submitted will be kept by the YHKCC at least seven (7) years.
- (c) I give consent to the YHKCC and its delegated bodies to process my application to liaise with related parties to verify and disclose the information provided by me.
- (d) I also commit to inform all the family members as listed in the form that their personal data are provided to the YHKCC for the purposes of this application.
- (e) I understand that insufficient information / misrepresentation of facts will render an application being disqualified for further processing, restitution in full of the assistance granted and possible prosecution.
- (f) I commit to inform the YHKCC immediately of any the financial assistance obtained from any individual, the government and other organizations for the student in school year 2022/23. Any concealment of facts will lead to disqualification and restitution in full of the subsidy granted.
- (g) I understand that the actual subsidy amount is subject to the availability of the School Fee Remission and Scholarship Fund and the number of application. The calculation will be based on #1 and #2 on P.6 of the 《Guidelines on Fee Remission Scheme 2022/23》.
- (h) I understand, agree and accept all information, rules and regulations listed in the "Guidelines on Fee Remission Scheme".

The application will not be approved if we do not receive all the supporting documents

Date:_	Signature of Applicant	

(Appendix A)



YMCA of Hong Kong Christian College Fee Remission Scheme 2022/23

港青基信書院 學費減免計劃 Income Certificate 收入證明書

(For people who are employed with a salary, but cannot produce salary statements, taxation documents, bank statements showing payment of salary or other income proofs and yet not applicable to sole proprietor or partner of partnership business.)

Name of student:	 班別:	Class:
学生姓名 ·	5年5月 ·	
the period from April 202	1 to March 2022. Employer's initial is requ	ase provide the total income of the staff durin nired against any amendment. 22年3月期間的總收入。如有塗改,請僱主
Income of Applicant	申請者的收入	
This is to certify that 茲證明	, holder of Hong Ko 香港身份證號碼持有	
employed in this com	pany. His/Her total salary and allow 乃本公司職員其薪金、津貼及其他	
	_ (i.e. period fromto). 即至期間	
Company Chop 公司蓋章	Signature of Employer 僱主簽名	Name of Employer 僱主姓名

Income of Spouse 配偶的收入

This is to certify that, holder of Hong Kong I.D. Card No 茲證明					
is employed in this company.	His/Her total salary 乃本公司職員其薪金、		wance and other income is HK\$ 他收入的總和為港幣		
(i.e. po	eriod from	to 至期間).		
Company Chop 公司蓋章	Signature of Employer 僱主簽名		Name of Employer 僱主姓名		
Contact Telephone No. 聯絡電話	_	Date 日期			

Income of unmarried child residing with the family 同住未婚子女的收入

This is to certify that, holder of Hong Kong I. D. Card No							
HK\$	(i.e. period from	to). 即至期間					
Company Chop 公司蓋章	Signature of Employer 僱主簽名	Name of Employer 僱主姓名					
Contact Telephone No. 聯絡電話	Date 日期						

Only category 3 may need to complete this form

(Appendix B)



YMCA of Hong Kong Christian College Fee Remission Scheme 2022/23 Income Statement

(For people who are self-employed / have no fixed income and cannot produce any income proofs.)

Note: Sole proprietor or partner of partnership business should forward a Profit and Loss Account or taxation documents of 2021-2022 financial year.

Warning: The personal data given in this statement must be true and complete. Any persons who obtain property/pecuniary advantage by deception are liable to legal action.

1. Particular	rs of Student					
Name of student:			Class:			
Name of	Class:					
Name of						
2. Actual Inc	rome					
Name	Occupation/Others		riod 31 March 2022) To (M/Y)	Total Annual Income (HKD)	Payment method (cash / cheque / direct debit)	
Name of Applicant:						
	- I		Total:			
Name of Spouse:	1.					
	2.					
	3.					
			Total:			
Name of Unmarried Child residing with the family:	1.					
	2.					
	3.					
	I		Total:			
able to pro	for applicant, the spouse and/o oduce any income proofs are as a: I declare that the above infor	follows:		the family for	not being	
Date:	Sig	nature of Applica	nt:			