



惠僑英文中學

WAI KIU COLLEGE

九龍石硤尾偉智街十七號

17 Wai Chi Street, Shek Kip Mei, Kowloon, Hong Kong.

電郵地址(E-mail): wkc@wkc.edu.hk

電話: 852-2777 6289 傳真: 852-27767727

Tel: 852-2777 6289 Fax: 852-27767727

網址(Website): http://www.wkc.edu.hk

Ref.No.:SGS_ECA 23-24/01a

1st September, 2023.

Dear Parents/Guardians,

Student Activities Support Grant

We are glad to announce that our school's application for funding from the Student Activities Support Grant is successful. This fund will help to subsidize S.1 to S.6 students participating in extra-curricular activities. We sincerely hope that you will work with the school to encourage your child to actively participate in extra-curricular activities as these help with all round development. Application is now open to students who can meet any one of the following criteria:

1. Receiving full grant from the Student Financial Assistance Agency
2. Receiving half grant from the Student Financial Assistance Agency
3. Family is receiving Comprehensive Social Security Assistance (Please also hand in a copy of the Certificate of CSSA Recipients)
4. Family has financial difficulties (Please submit relevant documents to support the request.)

For support and accounting purposes, the attached reply slip should be filled in and handed in with relevant supporting document(s) to the Class Teacher on or before 30th September, 2023. If you have any enquiries, please contact Mr. CHAN Ming-hung. All information will be kept confidential.

Yours faithfully,

CHENG Che-yin M.H.
(Principal)

----- ✂ ----- **【Reply Slip】** -----

Ref.No.:SGS_ECA 23-24/01a

Dear Principal,

Student Activities Support Grant

*I have read the information of the Student Activities Support Grant and

I would / **would not** like to apply for the Student Activities Support Grant.

*Subsidy and Financial Aid Condition:

- Full grant from the Student Financial Assistance Agency.
- Half grant from the Student Financial Assistance Agency.
- Our family is receiving CSSA. (Please also hand in a copy of the Certificate of CSSA Recipients. The Expiry Date is: _____)
- Our family has financial difficulties, I hereby submit relevant documents.

Student's Name : _____

Class : _____ ()

Parent's Name : _____

Parent's Signature : _____

Date : _____

*(Put a tick in the appropriate box.)