



Law Ting Pong Secondary School
羅定邦中學

Office Use Only
Application No : 21/22- _____
Received on : _____

Application Form for Fee Remission Scheme

Name of Student(s): 1. _____ Student Number: _____
 2. _____ Student Number: _____
 3. _____ Student Number: _____

Please read the Guidelines on Fee Remission Scheme before complete the application form. Please put a “✓” in each appropriate box.

Category:	Supporting document(s) needed:
<input type="checkbox"/> Category 1: SFO	<input type="checkbox"/> A copy of HK identity document for each person living in the same house <input type="checkbox"/> An original copy and a photocopy of the Eligibility Certificate issued by Student Finance Office for the 2021/22 school year
<input type="checkbox"/> Category 2: CSSA	<input type="checkbox"/> A copy of HK identity document for each person living in the same house <input type="checkbox"/> An original copy and a photocopy of the Notification Letter from Comprehensive Social Security Assistance (CSSA) (Issued within 12 months of the submission date)
<input type="checkbox"/> Category 3: Others	<input type="checkbox"/> Please contact the General Office for the relevant form(s) and supporting document(s) needed

Part I Particulars of Family Members Living in the Same House (Please write in **BLOCK LETTERS**)

	Applicant(s)	Spouse	Family members	Family members	Family members
Name in English (According to HKID Card / Passport)					
Name in Chinese (if applicable)					
HKID Card No.	()	()	()	()	()
Date of Birth (dd/mm/yy)					
Relationship with the Applicant		* If your spouse is deceased, divorced or separated from you, please tick(✓) this box. <input type="checkbox"/>			
Address					
Home Telephone No.					
Mobile Phone No.					
Occupation					
Company Name					

Part II 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 parent in 2021/22 school year, and the level of support should be similar to that in the year of assessment.

- (b) I understand and consent that (i) Law Ting Pong Secondary School (LTPSS) 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 LTPSS will select a number of successful applications for counter-checking including home visits. If selected, I and my family members will fully cooperate with the staff of LTPSS; and (iii) the LTPSS 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 LTPSS 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 LTPSS for at least seven (7) years.
- (c) I give consent to LTPSS 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 LTPSS 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 LTPSS immediately of any the financial assistance obtained from any individual, the government and other organizations for the student in school year 2020/21. 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.
- (h) I understand, agree and accept all information, rules and regulations listed in the "Guidelines on Fee Remission Scheme".

Checklist:

Documents	Checked
A copy of HK identity document for each person living in the same house	
An original copy and a photocopy of the Eligibility Certificate issued by Student Financial Office (SFO) OR Notification Letter of Comprehensive Social Security Assistance (CSSA) <i>(the original copy will be returned to the applicant after checking)</i>	

Date: _____

Signature of Applicant: _____

Approval: (Office Use Only)

Prepared by:		
Name:	Signature:	Date:
Name:	Signature:	Date:
Recommended by:		
Name:	Signature:	Date:
Remarks:		
Approved by:		
Name:	Signature:	Date:
Remarks:		