

CCC HOH FUK TONG PRIMARY SCHOOL

REGISTRATION FORM (P.1) School Year:

Student Name : _____

Sex : _____ Date of Birth : _____

Place of Birth : _____ Tel. No.(Home) : _____

Address : _____

H.K. Birth Cert. No. : _____ Nationality : _____

If the student does not have a Hong Kong Birth Certificate, Please fill in the Document Type and Document No. of his/her valid identity document:

Document Type : _____ Document No. : _____

Newly-arrived Children : NO YES (Date of Entry from Mainland : _____)

STRN : (if applicable) _____

Spoken Language at Home : Cantonese Mandarin
 English Others : _____

Kindergarten : _____

Number of Younger Siblings : _____

Special Education/Intergrated Education No. : (if applicable) _____

1. Parent (Guardian) Name : _____

Relationship with the students : Fater/Mother/Others : _____

Occupation : _____

Emergency Tel. No.(Mobile Phone) : _____

Please paste a
recent photo here

2. Parent (Guardian) Name : _____

Relationship with the students : Fater/Mother/Others : _____

Occupation : _____

Emergency Tel. No.(Mobile Phone) : _____

Signature of Parent / Guardian : _____

Date : _____

Remark :

The above information is only for student registration, contact, school filling and submission to the Education Bureau.