# Kiangsu-Chekiang College (Kwai Chung)

Address: 16 Wing Fong Road, Kwai Chung Tel: 24202103
Email:kcckc@kcckc.edu.hk

Application No：27_____
EDB Rank：_____
Clerk in charge：_____
(School-only)

## Admission in September, 2027
## Application Form for Form One
## Discretionary Places

| **Applicant's Profile** | | | | |
|---|---|---|---|---|
| Name: | (English) | (Chinese) | | Photograph |
| Gender: | | HKID： | | |
| Date of Birth: | (DD) (MM) (YYYY) | Place of birth: | | |
| Home address: | | | | |
| Phone (Home): | | Parent's mobile: | | |
| EDB STRN: | | | | |

| **Education (please list in detail):** | | |
|---|---|---|
| Name of Primary School | Year Attended | Class attended |
| | _____ to _____ (YYYY to YYYY) | Primary _____ to Primary _____ |
| | _____ to _____ (YYYY to YYYY) | Primary _____ to Primary _____ |

| **Academic results** | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | Conduct | Academic Achievement | | | | | | |
| | | Chinese | English | Mathematics | General Studies | Form Ranking/ Total number of students (if any) | School-only | |
| | | | | | | | V | M |
| P.5 (2nd term) | | | | | | / | | |
| P.5 (Whole year) | | | | | | / | | |
| P.6 (1st term ) | | | | | | / | | |

| **Parent/Guardian information** | | | | |
|---|---|---|---|---|
| | Father | Mother | Guardian | Key contact person |
| Name | | | | ☐ Father ☐ Mother ☐ Guardian |
| Occupation | | | | *Please tick ☑ the appropriate box* |
| Contact number | | | | |

| **Extracurricular activities, awards, and other recognized qualifications** (From past 2 years) | | |
|---|---|---|
| | Year | **Extracurricular activities** (fill in the three most important extracurricular activities you have participated in) |
| 1. | | |
| 2. | | |
| 3. | | |
| | Year | **Awards** (fill in the names of the three best awards received) |
| 1. | | |
| 2. | | |
| 3. | | |
| | Year | **Other recognized qualifications** (e.g. Grade in Musical instruments, English level certificate, Putonghua level certificate, etc.) |
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |

| **Connections with our school (e.g., siblings enrolled at the school, children of graduates of the school, etc.)** | | |
|---|---|---|
| Name | Relationship with the applicant (student) | Year of enrollment/graduation |
| | | |
| | | |

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**Notes to Applicants:**

1. Submit the completed application form to the general office , from 4th January, 2027 to 18th January, 2027, during office hours.
   Office hours: Monday to Friday 9:00am-12:00noon; 2:00pm-5:00pm
   Saturday: 9:00am-12:00noon
2. Documents to attach with the application form:
   (a) Photocopy of Secondary One Discretionary Places (distributed by EDB).
   (b) Photocopy of HKID (to be crossed checked against original HKID).
   (c) Photocopy of Primary 5 and 6 report cards.
   (d) Photocopy of awards or certificates (If applicable).
   (e) Envelope with postage stamp ($2.4) affixed.
   (f) No need to attach Primary School recommendation letters.
   (g) Please submit whole set of documents at one time.
   (h) Once application is made, all materials submitted will not be returned.
3. Applicants will receive an interview notification before 5th March , 2027.
4. Visit our school website (http://www.kcckc.edu.hk/) or call (24202103) for more information.
5. According to the Prevention of Bribery Ordinance, no person may offer benefits to school staff in connection with the application for a school place.

**I confirm that the information I have provided is correct and accurate. If any information is found to be false, I understand that the school may refuse to process the application.**

Signature of Parent/Guardian：_____ Date：_____