

## 和 富 慈 善 基 金 李 宗 徳 小 學 W F JOSEPH LEE PRIMARY SCHOOL

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## <u>School Fee Remission Scheme</u> <u>2024-2025 Application Form</u>

## Part I Personal Data of Applicant (Student's Parent)

Name of Student:	Class (Class No.): ( )					
Name of Parent Applicant:						
Parent Applicant's I.D. No. (or other valid identity document):						
Correspondence Address:						
Telephone Number:	_					

Part II Particulars of Family Members (including the applicant, the student and members who are

dependents of the applicant)

	n the applican			1	1	
Name Age	Relationship	Please vif the family member resides with you, otherwise write his/her residing place (e.g. elderly home, mainland China etc)	Occupation	Employer or working place (or name of school and class)	Average monthly income of the latest 6 months (Including bonus / allowance / part-time income (excluding Mandatory Provident Fund (MPF) / Provident Fund contribution by employee))	For School Use (to be completed by the School Office)
		,			\$	
					+	
					\$	
					\$	
					\$	
					\$	
					\$	
Average monthly total income per family			\$			

## **Part III Family Financial Status** A. Please ✓ any subsidy you are receiving: ☐ Comprehensive Social Security Assistance ☐ School Textbook Assistance Scheme ( $\square$ work in progress/ waiting for the approval of the subsidy ☐ full grant ☐ half grant) $\square$ Do not apply any subsidy B. Ownership of property: $\square$ Yes (1) $\square$ self-residence (2) $\square$ rental (monthly rental income \$\_\_\_\_\_) (Please submit supporting rental document) $\square$ No C. Rental of property for self-residence: ☐ Yes (monthly rental payment \$\_\_\_\_\_ (Please submit supporting rental document) $\square$ No D. Total value of assets (including land / property, cash, bank saving, stocks & shares, and other assets which can be changed into cash): about \$ E. Average monthly expenses of the whole family: about \$\_\_\_\_\_ Part IV Attached Documents Required supporting documents include: Copy of identity documents of the applicant and his/her family members as listed in Part II; and (i) (ii) (For single-parent families) Copy of supporting documents for separation / divorce or spouse's Death Certificate. If applicants are unable to provide the supporting documents, please explain in writing the reasons and sign on an explanatory note; and Documentary proof on total income for the period from 1 April 2023 to 31 March 2024. (iii) Salaried employed person (1) Tax Demand Note issued by Inland Revenue Department; (including income of all full-(2) If (1) is not available, please submit Employer's Return of time or part-time jobs) Remuneration and Pensions Form; (3) If (1),(2) are not available, please submit Salary Statement; (4) If (1),(2) and (3) are not available, please submit Bank transaction record showing payment of salary, allowance etc. (together with the page showing the name of bank account holder) (Please highlight the salary entries with colour and remarks. For any entries other than income, please also make necessary remarks next to them, or else the school may include the amount in calculating family income.); (5) If (1) to (4) are not available, please submit Income Certificate certified by the employer. Declaration under Oath on average monthly income or annual income at Self-employed person / person District Offices under Home Affairs Department running business / person who cannot produce any income proofs (including person who has no fixed income) Person currently in receipt of Copy of the "Certificate of Comprehensive Social Security Assistance

Recipients (for Medical Waivers)"

**Affairs Department** 

Declaration under Oath on having no income at District Offices under Home

the Comprehensive

Security Assistance (CSSA)

applicable to person aged over 60)

Adult with no income (including housewife, unemployed, but not

Social

Landlord with rental income	<ul> <li>(1) Tenancy Agreement;</li> <li>(2) If (1) is not available, Bank transaction record showing rental income (together with the page showing the name of bank account holder) (Please highlight the entries with colour and remarks. For any entries other than income, please also make necessary remarks next to them, or else the school may include the amount in calculating family income).</li> </ul>					
Part V Declaration						
I hereby declare that:						
home visit and detailed (c) I understand that any m in full of the assistance (d) I understand that when	oseph Lee Primary vetting). isrepresentation, cogranted. the family financia	correct and complete. School to conduct authentication oncealment of facts will lead to d al circumstances may affect the f m the school of the changes so	isqualification and restitution ee remission level, such as a			
Date:	App	plicant's signature:				
Our school respects the without his/her prior con	privacy of the applications or School Use (to b	or the 'School Fee Remission Scheme ant and will not disclose the application of the completed by the School Office 10%	nt's personal or family details			
Group		Monthly Family Income	Level of Remission			
A 1. Applicants receiving C	omprehensive	(for a family of 3)				
Social Security Assista	nce (CSSA)	Less than \$17,960	100%			
2. Applicants eligible for fit assistance under the Stud Assistance Agency (SFA (FULL or HALF)	udent Financial	\$17,961 to \$23,320	75%			
	(AA)	\$23,321 to \$28,680	50%			
B Families who can submit J	proof documents	\$28,681 to \$30,020	25%			
Fee remission period: From		to				
Processed and vetted by:		Signature:				
Name of Principal:	S	signature:	Date:			