Yan Chai Hospital Wong Wha San Secondary School <u>Application for S1 Discretionary Places (2025 - 2026)</u> <u>Application Guidelines</u>

Attention

- 1. Our school will operate 4 classes of Secondary One in 2025 2026, and the number of Secondary One Discretionary Places available is **40**.
- 2. Admission criteria and weighting:

Academic Results
Conduct and Learning Attitude
Rank Order List from EDB
Median School Scho

3. Application Period:

2 January to 16 January 2025

Monday to Friday: 9:00am – 12:00noon; 2:00pm – 5:00pm

Saturday: 9:30am – 12:00noon

4. Application Fee: Free

Application Procedures

- 1. To obtain the application form of our school, applicants may
 - a. Collect it at the General Office of our school
 - * Address: No. 8 Tong Chun Street, Tseung Kwan O, N.T.
 - * Telephone No.: 2706 0477
 - b. Download it from our website
 - * Website: www.ychwwsss.edu.hk
 - c. * For parents registered as SSPA e-Platform users and bound their account with "iAM Smart+", apart from the paper Application Form, they may submit DP applications via the SSPA e-Platform.
- 2. The following should be handed in to our school **IN PERSON**:
 - i. A completed Application Form of our school
 - ii. A completed Application Form for S1 Discretionary Place of the Education Bureau (EDB)
 - iii. Photocopies of academic reports (P5 and P6)
 - iv. Photocopies of supporting documents on competitions, activities and services (if any)
 - v. Photocopies of supporting documents on prizes and awards (if any)
 - vi. **TWO** stamped (\$2.2) self-addressed envelopes (9" x 4")
 - vii. A completed the Declaration Form on Collection and Use of Personal Data
 - * Please produce the original of the applicant's <u>identity document</u> (e.g. Identity Card, Birth Certificate or Passport) for verification.
 - * Recommendation letter is NOT required.
 - * A copy of the "Parent's Copy" will be returned to the applicant upon receipt of the application.
 - * The personal data collected will only be used for processing the application for S1 Discretionary places.
- 3. ALL applicants will be invited to attend an interview on 15 March 2025. An interview notice will be sent to applicants in due course.
- 4. According to EDB, applicants should not apply for more than **TWO** secondary schools participating in the SSPA System.
- 5. Parents of successful applications will receive a notification from our school by letter and phone on 31 March 2025. Please note that this notification may not be the final Discretionary Place application results under SSPA. Parents do NOT need to reply to the notification. The final Discretionary Places Allocation results will be released by EDB together with the Central Allocation Results on 8 July 2025.

仁濟醫院王華湘中學 中一自行分配學位 (2025-2026學年) 申 請 須 知

注意事項

- 1. 本校於2025-2026學年開設四班中一,自行分配學位共40個。
- 2. 收生準則及比重:

學業成績 : 25% 面試表現 : 20% 操行及態度 : 20% 獎項 : 10% 教育局成績次第 : 20% 聯課活動 : 5%

3. 申請日期:

2025年1月2日至1月16日

星期一至五: 9:00am - 12:00noon; 2:00pm - 5:00pm

星期六: 9:30am - 12:00noon

4. 報名費用:免費

申請程序

- 1. 申請者可透過下列方法,索取申請表格:
 - (1) 於本校校務處索取
 - * 地址:新界將軍澳唐俊街8號
 - * 電話: 2706 0477
 - (2) 本校網頁下載
 - * 網址:www.ychwwsss.edu.hk
 - (3)*如家長已登記成為「中一派位電子平台」用戶並以「智方便+」綁定帳戶,除紙本申請表外, 亦可透過「中一派位電子平台」遞交自行分配學位申請知。
- 2. 親自交回以下文件:
 - (1) 本校「中一自行分配學位申請表」
 - (2) 教育局「中一自行分配學位申請表」
 - (3) 成績表影印本(小五全年及小六上學期)
 - (4) 校內、校外比賽及活動或服務的證明文件副本(如有)
 - (5) 獎項的證明文件副本(如有)
 - (6) **兩個** 9吋×4吋 回郵信封(寫上學生姓名及地址,並貼上\$2.2郵票)
 - (7) 簽署個人資料收集及使用同意書
 - * 申請者交表時須帶同**身份證明文件**正本(例如:香港身份證、出世紙、護照),以核實資料。
 - * 申請者無須提交小學推薦信。
 - * 交表後,本校會給予申請人「家長存根」以確認申請。
 - * 所有於申請程序中收取的個人資料,只用於與辦理申請入學有關之事宜。
- 3. **所有**申請者及其家長將被邀請參加面試,日期為2025年3月15日。學校將稍後專函通知申請者有關 面試日期
- 4. 按教育局規定,每名小六學生在自行分配學位階段不可申請超過兩間參加「中學學位分配辦法」的中學。
- 5. 學校於2025年3月31日會透過書面及電話通知所有正取學生的家長,但家長毋須回覆通知。請注意, 此通知並不一定等同中一派位的最終派位結果。學生最終的派位結果將於2025年7月8日由教育局 與統一派位結果一併公布。

Yan Chai Hospital Wong Wha San Secondary School 仁濟醫院王華湘中學

Application Form for S1 Discretionary Place (2025 - 2026) 中一自行分配學位申請表 (2025 - 2026)

Date Received 收表日期:_____/ (Form No. 編號:_____)

Applicant's Recent Photo

相日

| Part 1 第一部份: Applicant's | s Information 學生資料 | | | <i>)</i> I | |
|---|---------------------------------|---------------|------------|------------|--|
| Name in English 英文姓名: | ish 英文姓名: Name in Chinese 中文姓名: | | | | |
| HK ID No. 身份證號碼: | (<u>)</u> ST | () STRN 學生編號: | | | |
| Sex 性別: | Date of Birth 出生日期: | DD 日/ | MM 月/ | YY 年 | |
| Place of Birth 出生地點: | Email 電子郵箱: | | | | |
| Address 住址: | | | | | |
| Previous Schools Attended 過去三年 | · 曾就讀學校資料: | | | | |
| Year 年度 | 27 001 12414 716 | | Class/Form | 班別/年級 | |
| 2022 - 2023 | | | | | |
| 2023 - 2024 | | | | | |
| 2024 - 2025 | | | | | |
| Please give reasons of choosing our sc Talents 特殊才能: | chool 申請入讀本校原因: | | | | |
| Information Technology (IT) skills 對 | 資訊科技學習的興趣及能力: | | | | |
| Please provide information if the appli 就讀本校的兄弟姊妹姓名及班別 | | our school: | | | |
| Part 2 第二部份: Parent / Gu | nardian Information 家長 / 」 | 監護人資料 | | | |
| Name in English 英文姓名: | Name in O | Chinese 中文姓名 | : | | |
| Relationship with Applicant 與學生屬 | 揭 徐: | | | | |
| Mobile Phone. No. 手提電話: | Tel. No. (Home | e) 住宅電話號碼 | : | | |

Collection and Use of Personal Data

Purpose of Collection

- 1. The personal data provided by you in this form will only be used by the School for processing related matters of the S1 Discretionary places for 2025 -2026.
- 2. The provision of personal data required by this form and during the processing of this form is obligatory. In the event that the required personal data is not provided, we may not be able to handle or further process the form.

Data User

The personal data you provide will be made available to designated persons working in the School.

Access to Personal Data

You have the right to request access to and correction of the personal data held by the School. Request for access or correction of personal data should be made in writing to the School at Yan Chai Hospital Wong Wha San Secondary School, 8 Tong Chun Street, Tseung Kwan O, N.T. Hong Kong.

| ☐ I have read, understand and agree to the above terms and conditions. | | | | | | | |
|--|-----------|----------|--|--|--|--|--|
| Name of Parent/Guardian | Signature | Date | | | | | |

個人資料的收集及使用

收集個人資料的目的

- 1. 你在本表格提供的個人資料,只會供本校用於辦理 2025-2026 年度中一自行分配學位申 請相關事宜。
- 2. 你必須按本表格的要求及於本校處理本表格的過程中提供個人資料。假如你沒有提供該 等個人資料,本校可能無法辦理或繼續處理相關申請。

資料使用者

你提供的個人資料會供本校指定人員閱覽。

查閱個人資料

你有權要求查閱及更正本校所持有關於你的個人資料。如需查閱或更正個人資料, 請以書面向

| 本校提出申請(地址:將軍澳唐 | | | 的外日四下 |
|-----------------|----------|-------|-------|
| □ 本人已閱讀、明白及同意以」 | 上的條款及細則。 | | |
| | | | |
| 家長或監護人姓名 | 簽署 | 日 | 期 |