



**Christian Family Service Centre
Cheerland Kindergarten & Child Care Centre
Admission Application (0-2 Ages Classes)**

For School Use Only

App. No.: _____

Date of Submission: _____

Student No.: _____

I. Applicant's Information (Write in Block Letter)

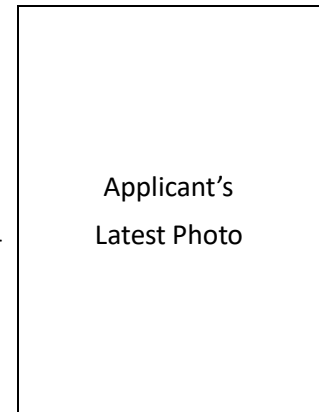
Student Name: (Chi) _____ (Eng) _____

*Date of Birth/
Expected due date: _____ Birth Certificate No: _____

Age: _____ Gender: _____

Contact No: _____ Email: _____

Address: _____



Application Date: _____ (DD/MM/YY) Expected Start Date: _____ (DD/MM/YY) * Delete as appropriate

II. Parents' Information

Name	Relationship	Occupation	Contact No. (Day)	Contact No. (Night)	Remarks
	Father				
	Mother				

III. Others (Please "✓" as appropriate. *Please delete as appropriate.)

Reason for applying: _____

Look after Situation: By family By others: *Day/Night Others _____

Referred by: Self-application Friends and Relatives Promotion (*Leaflet/Poster/Exhibition/Internet)

Others _____

Siblings study in this school (Name / Year) _____

IV. Documents and Fee required

1. Completed Application Form
2. Copy of applicant's Birth Certificate (Baby was borned only)
3. Copy of applicant's Immunization record (Baby was borned only)
4. Three envelopes with address, student name and stamp(s)
5. \$40 Application Fee (Cash is accepted. For mail application, please deposit the application fee to HSBC A/C No: 030-1-239950 and return with the receipt.)

*All submission of documents can be in person or by post.

*Incomplete documents will not be processed.

Please "✓" as appropriate.

I certify the above provided information is correct and for school reference only. I understand that I can contact the school for any changes. According to PDPO, all application forms of unsuccessful applicants will be shredded.

Parent's signature: _____

Date: _____

(Revised date: 3/2021)