



Hong Kong Housing Society Award 2016

Application Form for Bursary

| Checl | klist before submitting your application: HAVE YOU SUBMITTED |
|-------|--|
| | A completed application form with signature and date |
| | A photocopy of your transcript |
| | A photocopy of your HKID card |
| | An essay of 250-300 words IN ENGLISH |
| | Copies of supporting documents (if any) |
| | Reference letters (if any) |





Hong Kong Housing Society Award 2016

Application for Bursary

Please use a Black/Blue ball pen to fill out the form in **English**. The essay (Part E) should be submitted in typed format using A4-sized paper separately.

| A. Personal Particulars | | | | |
|---|---------------|-------------------|--------------|--------------------|
| Name (English) : | (Chinese) | | Sex: | Age : |
| Year of Study in 2014/2015: Name of | of Institute: | | | |
| Programme of study: | | Full-time/Part-ti | me : | |
| Correspondence Address: | | | | |
| Contact Tel no.: | (Home) | (Mobi | le) | (Fax) |
| E-mail Address: | | HKID No.: | | |
| B. Academic Results | | | | |
| 1. Cumulative G.P.A. 2014/20 Please attach the most rec | | | | |
| C. Financial Situation | | | | |
| Name of family members # | Job | Monthly income * | Relationship | with the applicant |
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(Please use separate sheet if necessary)

- # "Family members" include the core family members residing with you, for example, your parents, your unmarried siblings and grandparents.
- * "Monthly income" refers to the average monthly income, including salary or wages, leave pay, employee's MPF contribution, business profit, fees received for service rendered, bonuses, cash awards, commission, tips, allowances, income earned from part-time employment, and other earnings for the period 1.9.2014 31.8.2015.

| Pleas | se "✓" as appropriate |
|--------|---|
| 1. | Did anyone of your household receive Comprehensive Social Security Assistance (CSSA) for the period 1.9.2014 – 31.8.2015? |
| | Yes \square \rightarrow Total Amount per month: HK\$ for family member(s) No \square |
| 2. | Did anyone of your household need frequent medical expenses due to permanent incapacity or chronic sickness? |
| | Yes $\square \rightarrow$ Total Amount per month: HK\$ for family member(s) No \square |
| 3. | Does the patient above enjoy the medical fee waiver mechanism from the government? Yes No |
| 4. | Did anyone of your household above receive any remittances, alimony or contributions^ from other family members |
| | (e.g. your siblings who are not residing with you and your parents) for the period 1.9.2014 – 31.8.2015? |
| | Yes \square \rightarrow Total Amount per month : HK\$ No \square |
| | ^ "Contributions" refers to family / living expenses, mortgage payment, rental expenses, etc. |
| 5. | Did anyone of your household above earn from investment* for the period 1.9.2014 – 31.8.2015? |
| | $_{\text{Yes}} \square \rightarrow _{\text{Annual Amount : HK\$}} $ |
| | * "Investment" includes all sorts of investments such as shares, warrants, bonds and funds. |
| 6. | Have you applied for Government grant/loan for the period 1.9.2014 – 31.8.2015? |
| | Yes $\square \rightarrow$ Total Amount : HK\$(grant) / HK\$(loan) No \square |
| 7. | Have you applied for Government Non-means Tested Loan Scheme (免入息審查貸款) for the period 1.9.2014 – 31.8.2015? |
| | $_{\text{Yes}} \square \rightarrow _{\text{Total Amount : HK\$}} $ |
| 8. | Are you employed as part-time worker for the period 1.9.2014 – 31.8.2015? |
| | Yes \longrightarrow Income per month: HK\$ No |
| 9. | Annual tuition fee: HK\$ Course duration: |
| A 1 10 | |
| Addi | itional information by applicant (Special circumstance / explanations that have not been reflected above) |
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| | Activities/clubs | Position | Description |
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| ease use se | eparate sheet if necessary) | | |
| n . | 1.0. | | |
| Personal | Statement | | |
| lease write | e an essay of 250-300 words (IN I | ENGLISH) | |
| In what | waya yanr knawladaa aaa | uirad in sahaal will haln | you contribute to society in future? |
| ın wnat | ways your knowledge acqu | nrea in school will help | you contribute to society in future? |
| | | | |
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| Declara | tion | | |
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(HSA) only for purposes related to the processing of application and administration. Under the provisions of the Personal Data (Privacy) Ordinance, applicants have the right to request access to, and correction of, their personal data. Applicants wishing to access or make corrections to their data should submit written requests to HSA. All the data will be destroyed one year after

completion of the selection process.