



**APPLICATION FORM FOR FEE REMISSION UNDER THE DIRECT SUBSIDY SCHEME 2024-2025
(FOR SUCCESSFUL APPLICANTS IN 2023-2024 ONLY)**

PART 1 – APPLICANT’S PERSONAL DATA

Name of student	(IN ENGLISH)	(IN CHINESE)
Class in 2024-2025	Class no.	
Class in 2023-2024	Class no.	
Name of applicant (Parent or guardian)	(IN ENGLISH)	(IN CHINESE)
HKID Card / Passport no.		
Marital status	Married / Separated / Divorced / Spouse deceased / Others (Please specify: _____)*	
Relationship with student		
Residential address		
Home telephone no.	Mobile phone / Pager no.	
Occupation & position		
Name of employer/firm		

* Please delete as appropriate. This information is to verify that the information of all family members reported by the applicant is completed accurately. Please note that the marital status will not affect the application process and result.

PART 2 – FEE REMISSION CALCULATOR

I have referred to the full version of the fee remission application form as shown on the School website



I have printed out the results shown in the fee remission calculator and attached herein.



I have (an)other son(s) studying in SPC/SPCPS in 2024-2025.

Name of student	(IN ENGLISH)	(IN CHINESE)	Class
Name of student	(IN ENGLISH)	(IN CHINESE)	Class

Comprehensive Social Security Assistance (CSSA): (Please fill in or/and tick as appropriate)

- The applicant is in receipt of Comprehensive Social Security Assistance#.
File Ref. No:
- The applicant is applying for Comprehensive Social Security Assistance, eligibility not yet confirmed.

#An applicant in receipt of CSSA will be granted full school fee remission. An applicant is required to provide a copy of the confirmation document issued by the Social Welfare Department.

Applicants receiving financial assistance provided by the **Student Financial Assistance Agency (SFAA)** can also apply for the Fee Remission. School fee remission will be provided for applicants in the level of assistance not less than that calculated according to the assessment mechanism used by the **SFAA**.

A **bursary scheme** is also available to students receiving school fee remission. Its aim is to assist students with the cost of learning or attending activities organised/approved by the School. Students receiving the school fee remission may also apply for reimbursement of school bus fare twice a year.

PART 3 – DECLARATION

(a) By applicant

I, _____ (name), have read and fully understood the Fee Remission Scheme. I hereby make the following declarations:

- (i) The information in this application form and the supporting documents, **both in original and copied forms** provided by me, are complete and true. I understand that St. Paul’s College Primary School will initially assess my eligibility and grant assistance on the data provided by me. I also understand that St. Paul’s College Primary School may conduct investigation, including further interview, or if necessary, may appoint a third party to conduct an audit over the information provided, for authentication of my application data, and based on the results, St. Paul’s College Primary School may make adjustments to the extent of remission entitled. I also understand that any omission/misrepresentation of information with a view to obtaining pecuniary advantage by deception is an offence and is liable to legal proceedings.
- (ii) I give consent to St. Paul’s College Primary School or any responsible staff or agent of the school acting on behalf of the school to process my application and to liaise with related parties to verify and to disclose the personal data provided by me in this application form. Related parties may include my/my spouse’s present/previous employer(s), government departments such as the Social Welfare Department, Education Bureau, Inland Revenue Department, etc. and organisations such as schools, the Hong Kong Examinations and Assessment Authority, Hong Kong Jockey Club Scholarship Fund Committee, etc. I also confirm that I have obtained the consent of the family members listed in this application form to provide their personal data to St. Paul’s College Primary School for the purpose of this application.
- (iii) In the event of any dispute arising from this application, and/or any matters therein, the school’s decision should be construed as final and conclusive.

Signature of applicant: _____ Date: _____

(b) By applicant’s spouse or other family member

I, _____ (name), spouse of the applicant,

I, _____ (name), _____ (relationship with the applicant) of the applicant, have read and fully understood the Fee Remission Scheme. We/I* hereby make the following declarations:

- (i) The personal information provided by us/me* is complete and true. We/I* also understand that any omission/misrepresentation of information with a view to obtaining pecuniary advantage by deception is an offence and is liable to legal proceedings.
- (ii) We/I* further give our/my consent to any government departments or private bodies to release our/my personal data to St. Paul’s College Primary School for the purpose of verifying the information about our/my income and/or asset as reported in connection with this application.
- (iii) In the event of any dispute arising from this application, and/or any matters therein, the school’s decision should be construed as final and conclusive.

*Please delete as appropriate.

Signature of applicant’s spouse: _____ Date: _____

Signature of other family member: _____ Date: _____

PART 4 – DECLARATION (OATHS AND DECLARATIONS ORDINANCE)

I, _____, HKID No. _____, solemnly, sincerely and truly declare that:

1. I am the _____ (state relationship, father, mother or guardian) of the St. Paul’s College Primary School student, _____ (state the name of the student).
2. The information provided in this application form is true and complete to the best of my knowledge.
3. I am aware that St. Paul’s College Primary School will determine my application for school fee remission based on the information provided in this application.
4. And I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Ordinance.

Declared at _____
_____,
in the HKSAR this _____ day of _____.

Signature of declarant

Before me,
Commissioner for Oaths : _____

The Declaration above may be made at any District Office of the Government of the Hong Kong SAR, or before any Commissioner for Oaths.

NOTES ON COMPLETING THE FORM*

- (a) Applicants should write clearly in black or blue ink when completing the application forms.
- (b) Each applicant representing a student should submit one application form.
- (c) The applicant must be the student's parent. If both parents are deceased or unable to exercise their guardianship, the applicant must be the guardian registered in the school record.
- (d) If the application form is not duly completed, the application will not be considered.
- (e) Application forms, once submitted, are not returnable.
- (f) The information provided will be used for the sole purpose of assessing the application for fee remission under this scheme.
- (g) After processing the application, the data will be retained for future administrative use. The data will be kept confidential and are only accessible to the school. The applicant has the right to obtain access to and request correction of any personal information of himself/herself held by the school. Requests for such access should be made in writing to the Principal.
- (h) All applicants must complete the application form fully and truthfully. The information supplied by the applicant in this application form will be used by the school to determine the appropriate level of financial assistance to be granted. Any misrepresentation or omission may lead to disqualification from current as well as future applications and/or immediate payment of the school fee in full without any remission and possibly court proceedings. Applicants are reminded that it is an offence to obtain property/pecuniary advantage by deception. Any person who does so commits an offence and is liable, on conviction, to imprisonment for a maximum of 10 years under the Theft Ordinance (Laws of Hong Kong, Chapter 210). Besides, any person who wilfully makes a statement which he knows to be false shall be guilty of an offence and shall be liable on conviction to imprisonment for 7 years and to a fine under the Crimes Ordinance (Laws of Hong Kong, Chapter 200).
- (i) The information provided in this application form submitted are subject to strict verification.
- (j) For enquiries, please contact 3710-1777 during office hours.
- (k) The completed application form should be returned to the School Office on or before _____.

Any student whose family is experiencing financial hardship due to sudden and unforeseen circumstances arising during a school year may, at any time, apply to the School for the remission. The School may offer a special remission to these families on compassionate grounds.

***Full version of the application form can be found on the school website.**



No. of additional sheets:
(To be filled in by the applicant)

FOR SCHOOL USE ONLY

I. (a) The applicant is in receipt of Comprehensive Social Security Assistance.

(b) According to the information provided, the total number of points scored and the fee remission level obtained by the applicant under the School's Fee Remission Reckoner are:

Full	Three-Quarters	Half	One-Quarter	No Remission
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(c) The adjusted percentage of fee remission for those eligible families having (Ref no.): _____ more than one child attending St. Paul's College Primary School is:

Full	Three-Quarters	Half	One-Quarter	No Remission
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Processed by: _____

Approved by: _____

II. Principal's decision:

Applicant's eligibility for fee remission:

Full	Three-Quarters	Half	One-Quarter	No Remission
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date: _____

Signature of Principal: _____

Items to be verified:

Verification results:

Processed by: _____

Approved by: _____

Date: _____