



PRISTINE KINDERGARTEN

EDUCATION WITH LOVE AND CARE

天純幼稚園

Application No. _____ (OFFICE USE)

Application Date: _____
DD / MM / YYYY

Admission Application Form 入學申請表

Name in English: 英文姓名:			
Name in Chinese: 中文姓名:		Sex 性別:	<input type="checkbox"/> M 男 <input type="checkbox"/> F 女

Photo 相片

Date of Birth: 出生日期:		Ethnicity: 種族:	
First Language Spoken at Home: 家中主要使用的語言:			

Name of Mother: 母親姓名:		Tel. No. 聯絡電話:		Occupation: 職業:	
Name of Father: 父親姓名:		Tel. No. 聯絡電話:		Occupation: 職業:	
Email Address 電郵地址:					

Home Address: 住址:	Flat 室 _____ Floor 樓 _____ Block 座 _____				
	Name of building 大廈名稱 _____				
	Estate 屋邨 / Village 村名稱 _____				
	No. and Street Name 號數及街道名稱 _____				
	District 地區 _____ HK 香港 / KLN 九龍 / NT 新界				
Need School Bus Service 需要校車服務:		<input type="checkbox"/> Yes 需要			<input type="checkbox"/> No 不需要

Class Applied 申請班別:	<input type="checkbox"/> K1 (Nursery) 幼兒班	<input type="checkbox"/> K2 (Lower KG) 低班	<input type="checkbox"/> K3 (Upper KG) 高班
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Session Applied 申請時段:	<input type="checkbox"/> A.M. 上午班	<input type="checkbox"/> P.M. 下午班
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Previous school: 目前就讀之學校: _____
<i>If applying for K2 or K3 or transferring from another school. 謹供轉校生或申請讀 k. 2 或 K. 3 學生填寫。</i>

FOR OFFICE USE ONLY			
Photocopy of Documentary Proof:			
Applicant:	<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> HKID Card	<input type="checkbox"/> Travel Document <input type="checkbox"/> Address Proof
	<input type="checkbox"/> Vaccination Record	<input type="checkbox"/> Self-addressed and Stamped Envelope	
Parents:	<input type="checkbox"/> HKID Card	<input type="checkbox"/> Travel Document	
Application Fee HK\$40.00 _____ (Paid Date and Stamp)			