

Reply Slip (S.4 – S.6 Students Only)

Date: _____

Dear Principal,

I would like to apply for School Fee Remission for my child/ward. I hereby submit the reply slip, together with the original and one photocopy of the 2023-2024 Eligibility Certificate or Student Financial Assistance Schemes Notification of Result issued by the Student Finance Office (SFO) or the valid Certificate of Comprehensive Social Security Assistance Recipients issued by the Social Welfare Department to School for processing my application.

Assessment Result – Level of Assistance* : Full Half

Effective Date: _____

or

Certificate of Comprehensive Social Security Assistance Recipients (for Medical Waivers)

Valid from _____ until _____

Name of Student: _____ Class: _____ ()

Name of Parent/Guardian#: _____

Signature of Parent/Guardian: _____

* Please '✓' the appropriate box.

Name of Parent/Guardian must be the same as the Name of the Application on the Eligibility Certificate.