

Reverend Canon S.F. Tso and Mrs. Amy Hoh Tso Memorial Scholarship Fund

Please complete the form in black ink and send it to “True Light Middle School of Hong Kong”.

A. Personal Particulars

1. Full Name of Applicant : _____
*Mr./Mrs./Miss
(as shown on the HKID card) _____ (English)
 : _____ (Chinese)
2. Date of Birth : _____
 Place of Birth : _____
3. Length of Residence in HK: ____ years (from ____ to ____)
4. Nationality : _____
5. HKID Card No. : _____
6. Home Address : _____

7. Telephone No. (H) : _____ Daytime Contact No. : _____



B. Education Background

8.	School / Institution Attended	Date	Level

9. Public Examination Results (Please submit certificates)

Type	Year	Subject	Grade	Subject	Grade
HKCEE / HKDSE					
HKALE					
Others					

✓ as appropriate
 * Delete as appropriate

10. Other public examination results/expected qualifications

C. Extra-curricular Activity / Service Record

11. Indicate your active involvement in community service and church work in the past 2 years. (Please list them in order of importance, and provide certificates as fully as possible.)

Community Service / Christian Service	Organization	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

D. Financial Status (to be completed only by those who are working)

Personal Income (monthly average) _____

Family Total Income (monthly average) _____

E. The course you intend to study (Please submit proof of enrolment/school attendance certificate)

12. Name of seminary I have applied for admission to:

Course Name : _____

Intended : Year _____ - Year _____
Duration of Study

F. Applicant's Declaration

I _____ (Applicant's Name) declare that the personal data and documentary evidence provided by me in this application are true and complete to the best of my knowledge. I have read and fully understood the terms as stipulated in the **Details of the Scholarship**, and I consent to the collection, usage, processing and storage of any personal information contained in this form by the Fund Secretariat.

Date: _____

Signature: _____

✓ as appropriate
* Delete as appropriate

曹思晃牧師及曹何玉瑛校長紀念獎學基金

Reverend Canon S.F. Tso and Mrs. Amy Hoh Tso Memorial Scholarship Fund

填妥的表格寄交香港真光中學，請用黑筆填寫。

A. 個人資料

1. 申請人全名 : _____
*先生/太太/小姐 (資料與身份証相同) (英文)
- : _____
(中文)
2. 出生日期 : _____
出生地點 : _____
3. 居港年期 : _____年 (由_____至_____)
4. 國籍 : _____
5. 身份証號碼 : _____
6. 住址 : _____

7. 電話 (家) : _____ 日間聯絡電話 : _____
- 在此貼上近照

B. 教育背境

8.

就讀中學 / 學院名稱	日期	程度

9. 公開試成績 (請提交證明文件)

類別	年份	科目	等級	科目	等級
會考					
高考					
其他					

10. 其他公開成績或預計會得到的資格

C. 課外活動 / 服務紀錄

11. 過去兩年曾積極參予的社區服務和教會事奉（請按重要性排列，並盡量提供證明文件）

服務 / 事奉項目	機構	日期
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

D. 經濟狀況（只供在職者填寫）

個人收入(平均每月) _____

家庭總收入(平均每月) _____

E. 擬修讀的課程（提交入學/在學證明）

12. 報讀神學院名稱：_____

課程名稱：_____

擬修讀年期：_____ 年 - _____ 年

F. 申請人聲明

本人_____鄭重聲明此項申請所提各項係就本人所知已力求詳盡正確。
(姓名)

本人完全明白此項獎學金所列明各項細節和條件，並同意讓基金秘書處收集、應用、整理及儲存本人的個人資料。

日期:_____

簽署:_____