

**Student Finance Office**  
**Working Family and Student Financial Assistance Agency**  
**Notes on How to Complete and Return Electronic Household Application Form**

**WARNING**

The personal data in the application will be used to assess an applicant's eligibility for financial assistance and the appropriate level of assistance to be awarded. 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, Chapter 210.

**IMPORTANT NOTES**

**I. General Information**

- Please complete Parts I to VIII according to the instructions stated in the Electronic Household Application Form (E-Form) and this Notes. All the items marked with \* are mandatory items.
- "Assessment year" mentioned in this Notes generally refers to the preceding financial year. The assessment year for application in this school year (i.e. 2022/23 application) refers to the 2021-22 financial year (1.4.2021 – 31.3.2022).
- Applicants are suggested to access, complete and submit their E-Form with the latest version of Microsoft Edge, Google Chrome, Mozilla Firefox or Safari. If applicants are not using the aforementioned browsers or are using an older version of the aforementioned browsers, the contents and/or options of the E-Form may not be displayed or functioned properly.

**II. Notes on Submission of Supporting Documents**

- Regarding the copy of supporting documents required to be submitted (e.g. identity documents, supporting documents for separation / divorce (for single-parent families), documentary proof on annual income, etc.), please refer to Paragraph 13.4 of this Notes for details. Please note that applicants must provide the required supporting documents; otherwise, the Student Finance Office (SFO) will not be able to process the application.
- Please follow the instructions stated on the "Cover Sheet for Supporting Documents" [SFO 108] and submit copies of identity documents of the applicant and those of the family members (including the dependent parent(s) (if applicable)) claimed in the form together with copies of other document proof related to the application.

**Accessing E-Form**

- 1.1 Applicant may access the E-Form in the "SFO E-link – My Applications (Financial Assistance Schemes at Pre-primary, Primary and Secondary Levels)" website (<https://ess.wfsfaa.gov.hk/espps>). Please click the "E-Form" tab in the left menu bar to access the E-Form.

**Completing E-Form**

**Part I Particulars of the Applicant**

(Applicants must be the parent or the guardian (as recognized under Guardianship of Minors Ordinance, Cap 13) of the student-applicants)

**Part I Particulars of the Applicant**

*(The Applicant must be the parent or guardian (as recognised under Guardianship of Minors Ordinance, Cap 13) of the student-applicant(s).)*

1. Name in Chinese

陳大文

2. Title@#  A. Mr  B. Ms  C. Miss

3. Name in English \*

CHAN TAI MAN

Please enter the surname first; and leave a space between each word.

4. Correspondence Address *(Please fill out in English)*

Flat: A, Floor: 12, Block:

Name of Building: HAPPY HOUSE

Estate / Village: HARMONY ESTATE

No. & Name of Street:

District: SHAM SHUI PO

Area \*  1. HK  2. KLN  3. NT  4. OHK(Outside HK)

5. Year of Birth \* 1962

6. HKID Card No. \* A1234567

*(If HKID Card No. is not available, please provide Other Identity Document No. with copy of relevant proof.)*

Other Identity Document Type *(Please refer to paragraph 2.1 of "Notes on How to Complete and Return Electronic Household Application Form")*

Other Identity Document No.

7. Home Tel No. @ 12345678

8. HK Mobile Phone No. 12345678

9. Email Address \* chantm@gmail.com

Re-enter Email Address \* chantm@gmail.com

10. Your marital status during the period from 1.4.2021 to 31.3.2022 #  A. Married *(Please provide spouse's information in Part II)*  B. Divorced / Separated / Widowed / Single / Others *(Please provide copies of supporting documents, and spouse's information need not be provided in Part II)*

11. Ethnicity <sup>Note</sup> @  A. Chinese  B. Pakistani  C. Nepalese  D. Others

*and research purposes and will not affect the processing or assessment of*

Next Page

Applicant must enter the correct correspondence address. Otherwise, the SFO will not be able to contact the applicant in writing. If applicant can only confirm the place of residence after submitting the application, please inform the SFO the new correspondence address in writing once it is available. If applicant is not residing in Hong Kong, please enter a Hong Kong correspondence address for future correspondence.

Please enter the Hong Kong Identity (HKID) Card No. with reference to the example as shown in the box.

If applicant is not a holder of the HKID Card, please complete these two fields by referring to Paragraph 2.1 of this Notes.

To facilitate the SFO to issue acknowledgement of receipt of applications and the related payment information (if applicable) by means of SMS, please enter applicant's Hong Kong mobile phone number.

To facilitate the SFO to contact applicant by electronic means where applicable, applicant must enter a valid email address and re-enter the same for confirmation.

Please enter the marital status during the assessment year. If applicant is "Married", please check the box next to item (A) and enter the spouse's information in Part II of the E-Form.

If applicant is a single parent during the assessment year, please check the box next to item (B). Relevant options on marital status will be available for applicant to select and input (if applicable) after checking the box next to item (B).

After completing all items in Part I, please click "Next Page" to proceed to the following part.

2.1 If applicant (and/or his/her family member(s)) is (are) not a holder (holders) of the HKID Card, please select the applicable item from the dropdown menu of "Other Identity Document Type" comprising the following items, enter the relevant identity document number, and provide a copy of the identity document:

(i) Passport	(ii) Re-entry Permit	(iii) Certificate of Identity
(iv) Document of Identity	(v) Entry Permit	(vi) Declaration of ID for Visa Purpose
(vii) One-way Permit	(viii) Mainland identity documents	(ix) Others

## Part II Particulars of Family Members and Financial Assistance Schemes being Applied for

### 3.1 Spouse, student-applicants and unmarried children residing with the family

**Part II Particulars of Family Members and Financial Assistance Schemes being Applied for**

**A. Spouse**

1. Name in Chinese

黃小芬

2. Name in English \*

WONG SIU FAN

3. Year of Birth\*

1964

4. HKID Card No. \*

B1234567

*(If HKID Card No. is not available, please provide Other Identity Document No. with copy of relevant proof.)*

Other Identity Document Type *(Please refer to paragraph 2.1 of "Notes on How to Complete and Return Electronic Household Application Form")*

Other Identity Document No.

5. HK Mobile Phone No. @

12345678

Previous Page Next Page

Please enter the surname first; and leave a space between each word.

Please enter the HKID Card No. of your spouse claimed in the Form with reference to the example as shown in the box.

If applicant's spouse is not a holder of the HKID Card, please complete these two fields by referring to Paragraph 2.1 of this Notes.

After completing all items in Part II Section A, please click "Next Page" to proceed to the following part.

**B. Student-applicants and unmarried children residing with the family**  
*(If more than one child, please fill out this part starting from the youngest child.)*

**Student-applicant 1 / Unmarried child residing with the family 1**

1. Name in Chinese

陳小芳

2. Name in English \*

CHAN SIU FONG

3. Date of Birth (DD/MM/YYYY)\*

01 DD 01 MM 2006 YYYY

4. HKID Card No./ Birth Certificate No.\*

D1234567

If not available, please provide:

Other Identity Document Type *(Please refer to paragraph 2.1 of "Notes on How to Complete and Return Electronic Household Application Form")*

Other Identity Document No.

Please enter the surname first; and leave a space between each word.

Please enter the HKID Card No. / Birth Certificate No. of the student-applicant / unmarried child residing with the family claimed in the Form with reference to the example as shown in the box and submit a copy of the relevant identity document (if applicable).

If student-applicant / unmarried child residing with the family is not a holder of the HKID Card, please complete these two fields by referring to Paragraph 2.1 of this Notes.

5. Status for 2021-22#  A.Under education  B.In employment  C.Unemployed  D.Other

6. Name of School / Institution in 2022/23  
NUMBER ONE SECONDARY SCHOOL

7. Class level in 2022/23#  
S4

8. Mode of study#  A. Whole-day  B. Half-day (A.M. session)  C. Half-day (P.M. session)  D. Part-time

9. Apply for schemes (On student basis and you may choose more than 1 item, if applicable)#  Need  Do not need

**Kindergarten & below levels#**  
 (1)KCFRS + (2)Grant-KG^  
 (^ Grant-KG only applicable to KG students (K1-K3))  
**Applicants with children receiving whole-day child care services (N1-N2) should complete the "Social Needs" Assessment Form (SFO 235A) below and submit together with the supporting documents.**

**Primary & secondary levels or equivalent#**  
 (3) TA  
 (4) STS  
 (5) DYJFR  
 (6)FR(FAEAEC)

If applicant wishes to apply for KCFRS for the child receiving whole-day child care services, please download and complete the "Social Needs" Assessment Form, and submit it with the supporting documents.

If applicant wishes to apply for financial assistance for the child in this school year (including KCFRS, Grant-KG, TA, STS, DYJFR and FR(FAEAEC)), please check the appropriate box(es) under items 5, 8 and 9. The appropriate box(es) under item 9 will be enabled only after completion of items 7 and 8.

If applicant wishes to apply for financial assistance for pre-primary students (including (1) KCFRS and (2) Grant-KG), please check this box. Eligible KG student-applicants (K1-K3) will be provided with fee remission under KCFRS (if applicable) and Grant-KG. Eligible children receiving whole-day child care services (N1 & N2) will be provided with fee remission under KCFRS only.

Previous Page Next Page

**Student-applicant 2 / Unmarried child residing with the family 2**

1. Name in Chinese  
陳大明

2. Name in English\*  
CHAN TAI MING

3. Date of Birth (DD/MM/YYYY) \*  
01 DD 01 MM 2001 YYYY

4. HKID Card No./ Birth Certificate No.\*  
C1234567

If not available, please provide:  
Other Identity Document Type(Please refer to paragraph 2.1 of "Notes on How to Complete and Return Electronic Household Application Form")  
Other Identity Document No.

5. Status for 2021-22#  A.Under education  B.In employment  C.Unemployed  D.Other

6. Name of School / Institution in 2022/23  
YI JIN COLLEGE

7. Class level in 2022/23#  
DYJ

8. Mode of study#  A. Whole-day  B. Half-day (A.M. session)  C. Half-day (P.M. session)  D. Part-time

9. Apply for schemes (On student basis and you may choose more than 1 item, if applicable)#  Need  Do not need

**Kindergarten & below levels#**  
 (1)KCFRS + (2)Grant-KG^  
 (^ Grant-KG only applicable to KG students (K1-K3))  
**Applicants with children receiving whole-day child care services (N1-N2) should complete the "Social Needs" Assessment Form (SFO 235A) below and submit together with the supporting documents.**

**Primary & secondary levels or equivalent #**  
 (3) TA  
 (4) STS  
 (5) DYJFR  
 (6) FR(FAEAEC)

If the unmarried child residing with the family is studying at a tertiary institution in this school year, please check the "Do not need" box under the item of "Apply for schemes".

If applicant needs to add unmarried child residing with the family, please click "Add Child" to enter details of the new member and provide copies of the identity documents.

After completing all items in Part II Section B, please click "Next Page" to proceed to the following part.

Previous Page Next Page Add Child

- 3.1.1 Applicant's spouse and children in receipt of CSSA will not be counted as 'family members' under the Adjusted Family Income (AFI) mechanism.
- 3.1.2 Student-applicants who have been approved to receive financial support in respect of textbook expenses, internet access charges at home and student travel expenses including free transportation service to and from school by any public or private organizations or schools should not apply for the same type of assistance through the SFO. These organizations include, but are not limited to schools, the SWD, EDB, the Hong Kong Jockey Club, public transport companies, etc. If it is subsequently discovered that the student-applicant is benefitting from double subsidies, the applicant is liable to refund the overpaid amount forthwith upon the request of the SFO.
- 3.1.3 Applicant should refer to the following codes and select the applicable class level attended by his / her child(ren) in this school year from the dropdown menu:
- |                                                    |                             |
|----------------------------------------------------|-----------------------------|
| (i) Whole-day Child Care Centre (group aged 0-2):  | N1                          |
| (ii) Whole-day Child Care Centre (group aged 2-3): | N2                          |
| (iii) Nursery class in kindergarten:               | K1                          |
| (iv) Lower class in kindergarten:                  | K2                          |
| (v) Upper class in kindergarten:                   | K3                          |
| (vi) Primary 1 to 6:                               | P1 / P2 / P3 / P4 / P5 / P6 |
| (vii) Secondary 1 to 3:                            | S1 / S2 / S3                |
| (viii) Secondary 4 to 6:                           | S4 / S5 / S6                |
| (ix) Diploma Yi Jin:                               | DYJ                         |
| (x) Others (e.g. Tertiary Level):                  | Others                      |
- 3.1.4 If applicant wishes to amend the application details after submission of the E-Form (including applying for additional scheme(s) / amending scheme(s) that have been applied for), please submit the request in writing, together with justification, and post it to the SFO within 30 days from the submission date of the E-Form. Application for additional scheme(s) / amending the scheme(s) to apply for must be duly signed by the applicant with the Household Application Number / the HKID Card No. of the applicant specified. It will take longer time for processing these applications. Please note that late application for financial assistance will not be considered. In this regard, applicant should check carefully if he / she has chosen all the scheme(s) that he / she wishes to apply for before submission of the E-Form.

- 3.2 Subsidy for Internet Access Charges (SIA)  
 The applicant does not need to apply for SIA, which is on a household basis and only applicable to families with primary and secondary students. Families will be disbursed the subsidy provided that they can pass the means test and the student-applicant(s) can meet the eligibility criteria for SIA. This subsidy is not applicable to families with pre-primary students only.

**C. Subsidy for Internet Access Charges (SIA)**  
 (On household basis and only applicable to families with primary and secondary students. Not applicable to families with pre-primary students only.)  
 SIA will be disbursed to eligible families.

For families which **do not need** SIA, please put ✓ in the box.

Do not need

For families which **do not need** SIA, please check this box.

After completing Part II Section C, please click "Next Page" to proceed to the following part.

Previous Page      Next Page

### 3.3 Dependent parent

3.3.1 Dependent parent refers to the applicant's parents, including in-laws, who is not a recipient of the CSSA at the time of submission of application. They must, throughout the normal assessment year, not be in employment and meet any one of the following conditions for at least 6 months –

- (A) resided with the applicant's family; or
- (B) resided in premises owned or rented by the applicant or his / her spouse; or
- (C) resided in an elderly home and the expenses were fully paid by the applicant or his / her spouse OR totally supported by the applicant or his / her spouse.

**Remarks: Applicant or his / her spouse should continue to support their parent in this school year and the form of support should be similar to that in the year of assessment. Besides, as the number of family members may affect directly the level of assistance the applicant's family is eligible for, please submit the completed E-Form together with documentary proof for supporting the parents (e.g. tenancy agreement, residential address proof or receipt of the home for the elderly, etc.) to the SFO.**

3.3.2 If the number of dependent parents is more than 2, please supplement their information in the format as at Section D under Part II of the E-Form by uploading a separate sheet with the applicant's signature and submitting copies of the identity documents of the dependent parents provided in the form.

**D. Dependent Parent**  
(If Applicant or his/her spouse have no dependent parent, please do not fill out the spaces below.)

Is / are the dependent parent(s) (i) currently in receipt of the Comprehensive Social Security Assistance (CSSA) and/or (ii) under employment during the assessment period?#

Yes  No

(If yes, please skip Part 'D'. If no, please continue to complete the Electronic Household Application Form for definition of dependent parents including tenancy agreement, residential address proof, etc.)

**Dependent Parent 1**

Name in Chinese  
陳大福

Name in English \*  
CHAN TAI FUK

HKID Card No.\*  
E1234567

Other Identity Document Type (Please refer to paragraph 2.1 of "Notes on How to Complete and Return Electronic Household Application Form")

Other Identity Document No.

Year of Birth\*  
1940

Dependency Status (at least 6 months during 1.4.2021 to 31.3.2022)\*  
Please select one of the following dependency status

Resided with the applicant's family  
 Resided in premises owned or rented by the applicant or his/her spouse  
 Resided in an elderly home and the expenses were fully paid by the applicant or his/her spouse OR totally supported by the applicant or his/her spouse

Previous Page Next Page

Please check the appropriate box. If Yes, please skip Section D. If No, please continue to complete Section D and refer to Paragraph 3.3.1 of this Notes for definition of "Dependent Parent".

Please enter the personal particulars of dependent parent(s) and provide a copy of their identity documents (e.g. the Hong Kong Smart Identity Card) (if applicable) and documentary proof for supporting the parents.

If the dependent parent is not a holder of the HKID Card, please complete these two fields by referring to Paragraph 2.1 of this Notes.

Applicant should read Paragraph 3.3.1 (A), (B) and (C) of this Notes carefully and check the appropriate box(es).

After completing all items in Part II Section D, please click "Next Page" to proceed to the following part.

### Part III Residential Address

- 4.1 Applicant should enter the residential address in this part so that the SFO can arrange to conduct home visits for the selected applicants. If applicant's residential address is the same as the correspondence address provided in Part I of the E-Form, the applicant is not required to complete this part.

#### Part III Residential Address

*(If the correspondence address provided in Part I is not your residential address, please provide the full residential address in English in the following boxes, otherwise do not fill out the spaces below.)*

Flat (室)	Floor (樓)	Block (座)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Building		
<input type="text"/>		
Estate / Village		
<input type="text"/>		
No. & Name of Street		
<input type="text"/>		
District		
<input type="text"/>		
Area <input type="radio"/> 1. HK <input type="radio"/> 2. KLN <input type="radio"/> 3. NT <input type="radio"/> 4. OHK(Outside HK)		
<input type="text"/>		<input type="text"/>

After completing Part III, please click "Next Page" to proceed to the following part.

Previous Page Next Page

# Part IV Family Income

**1. Applicant**

Mode of employment  Full-time  Part-time

Position \* (Please specify period if it is not a whole year)

UNEMPLOYED (1.4.2021 – 30.4.2021); CLERK (1.5.2021 – 31.12.2021); SELF-EMPLOYED DRIVER (1.1.2022 – 31.3.2022)

Total Annual Income (\$) Including bonus / allowance / part-time income (excluding Mandatory Provident Fund (MPF) / Provident Fund contribution by employee)

Salary (\$) \*

80000

Business profit (\$) \* (If you did not carry on any business, please input "0" in this field.)

45000

**2. Spouse**

Mode of employment  Full-time  Part-time

Position (Please specify period if it is not a whole year)\*

HOUSEWIFE (1.4.2021 – 30.9.2021); PART-TIME CASHIER (1.10.2021 – 31.3.2022)

Total Annual Income (\$) Including bonus / allowance / part-time income (excluding Mandatory Provident Fund (MPF) / Provident Fund contribution by employee)

Salary (\$) \*

30000

Business profit (\$) \* (If you did not carry on any business, please input "0" in this field.)

0

**3. Unmarried child residing with the family (if applicable)**

Name

CHAN TAI MING

Mode of employment  Full-time  Part-time

Position (Please specify period if it is not a whole year)

WAITER (1.4.2021 – 10.6.2021); UNEMPLOYED (11.6.2021 – 31.3.2022)

Total Annual Income (\$) Including bonus / allowance / part-time income (excluding Mandatory Provident Fund (MPF) / Provident Fund contribution by employee)

Salary (\$) \*

36000

Business profit (\$) (If you did not carry on any business, please input "0" in this field.)

0

**5. Other income (if applicable)**

Contribution from children not residing together, relatives or friends (\$)

12000

Rental income of property, land, carpark, vehicle or vessel (\$)

96000

Interests from investments, fixed deposit (\$)

5000

Alimony (\$)

Pension (excluding lump sum retirement gratuity) (\$)

Widow's & Children's Compensation (\$)

Others (\$)

If applicant, his / her spouse or unmarried child residing with the family was **unemployed** during the assessment period, please complete the fields according to the following example.

Please enter the total income (integer without decimal places) in the assessment year. **The SFO will not accept estimated amount, and please provide the actual figure.** For other income source, e.g. rental income (see item 11 under "Items need to be reported" in Paragraph 5.1 of this Notes), contribution from children not residing with the family / relatives / friends, alimony or interests from investments, please enter the amount according to the following example.

After completing all items in Part IV, please click "Next Page" to proceed to the following part.

5.1 Types of incomes earned by the family both within and outside Hong Kong that should be reported are listed below for reference. For provision of documentary proofs, please refer to Paragraph 13.4 (v) of this Notes.

Items need to be reported		Items need not to be reported	
1	Salary (including the salary of applicant, applicant's spouse and student-applicant's unmarried sibling(s) residing with the applicant for full-time, part-time or temporary jobs, <u>excluding Mandatory Provident Fund (MPF) / Provident Fund contribution by employee</u> )	1	Financial assistance from the Government, or payment from the assistance programme under the Community Care Fund (such as Comprehensive Social Security Assistance / Old age allowance / Old age living allowance / Disability allowance / Retraining allowance / Work Incentive Transport Subsidy / Working Family Allowance etc.)
2	Double pay / Leave pay	2	Long service pay / Contract gratuity
3	Allowance (including overtime work / living / housing or rent / transport / meals / education / shift allowance, etc.)	3	Severance pay
4	Bonus / Commission / Tips	4	Loans
5	Studentship	5	Lump sum retirement gratuity / Provident fund
6	Wages in lieu of notice of dismissal	6	Inheritance
7	Business profits and other income earned by means of self-employment, such as hawking, driving taxis / minibuses / lorries, and fees for services rendered, etc.	7	Charity donations
8	Alimony	8	Insurance / accident / injury indemnity
9	Contribution from any person(s) not residing with applicant's family to any of the applicant's family member(s) (including money or contribution of housing / remittance(s) / contribution for mortgage repayment / rent / water / electricity / gas or other living expenses)	9	MPF / Provident Fund contribution by employee (the <u>ceiling</u> of contribution needs not to be reported is <u>\$18,000 per year</u> )
10	Interests from fixed deposits, stocks, shares and bonds, etc.		
11	Rental income of property, land, carpark, vehicle or vessel (including Hong Kong, the Mainland and overseas)		
12	Monthly pension / Widow's & Children's Compensation		

5.2 Applicant should provide the income proof and those of the family member(s) under employment. If the applicant, the applicant's spouse or any family member under employment has / have provided the Income Certificate (i.e. Sample I) or the Self-prepared Income Breakdown (i.e. Sample IV) as the income proof, the SFO may still require the applicant to concurrently provide the bank passbook, salary statement or other income proof for reference. If applicant cannot provide any income proof for special reasons, please notify the SFO in writing, providing justifiable reasons and the detailed calculation of income. Applicant should also sign on the explanatory letter personally. If the explanation or documents provided cannot substantiate the reported income information of the family member(s) concerned (e.g. self-written statement of income), the SFO may need to make adjustment and apply benchmark figures (based on statistical information provided by relevant government departments e.g. Census and Statistics Department) to assess the income of applicants and their family members. In assessing the family income, if necessary, the SFO may require the applicants to provide documentary proof of items which is not listed above or seek further clarification for amounts that were used for maintaining the living of the family but have not been accounted for in the application such as savings, loans. The SFO may also request the applicant to produce documentary proof including bank savings records, duly signed declaration from the debtor, etc. In case no valid proof is provided, the amounts for maintaining the living of the family may be taken as part of the family income.



7.5 For enquiries of “Bank Code”, applicant may approach the bank concerned for assistance.

7.6 If applicant needs to change the bank account number after submission of the E-Form, please advise the SFO of the change in writing with supporting document showing the name of the bank account holder and account number as soon as possible so as to avoid any delay in the disbursement of financial assistance.

## Part VII Applicant’s Supplementary Information

Please provide other special family information or details regarding family members in receipt of CSSA in this part. Otherwise, please leave this part blank.

1. If you have filled in Part II particulars of any student-applicant who is **not** a self-bearing child of yours, please specify his/her name and explain in detail with proof why the application is not submitted by the parent of the student.

2. If your family is receiving / has received CSSA any time during the period from 1 April 2021 to the time of submission of application, please specify the relevant duration, names of the family members in receipt of CSSA and quote the CSSA reference number.

WONG SIU FAN AND CHAN TAI MING RECEIVED CSSA DURING 1.4.2022 – 30.9.2022. THE CASE FILE NUMBER WAS ABC-C-123456.

3. If you have special financial hardship, please state details of the situation, relevant duration and submit supporting documents.

THE APPLICANT, CHAN TAI MAN HAS BEEN UNEMPLOYED SINCE 1.5.2022. THE FAMILY INCOME IS SUBSTANTIALLY REDUCED AFTER THE ASSESSMENT PERIOD WHICH RESULTS IN FINANCIAL HARDSHIP.

After completing all items in Part VII, please click “Next Page” to proceed to the following part.

Previous Page

Next Page

8.1 If there are substantial changes in the applicant’s family particulars after the assessment period (e.g. unemployment or substantial drop in income of a family member, etc.), please provide the relevant information in Item (3) of this part with copy of supporting documents.

## Part VIII Declaration

10.1 Applicant and his / her spouse (if applicable) should read through the paragraphs carefully and sign the Declaration digitally or on paper as follows -

- (i) signing the Declaration with “iAM Smart+” digitally; or
- (ii) printing the Declaration, signing in the appropriate space provided on the Declaration in black or blue ink and scanning the signed Declaration as one of the supporting documents for submission.

Applicant's Identity Document No. \*

A1234567

 Sign with iAM Smart (Applicant) [More Info](#)

Date

XX/XX/20XX

Spouse's Identity Document No. \*

B1234567

 Sign with iAM Smart (Spouse) [More Info](#)

Date

XX/XX/20XX

Applicant and/or his / her spouse may choose to sign the Declaration with “iAM Smart+”.

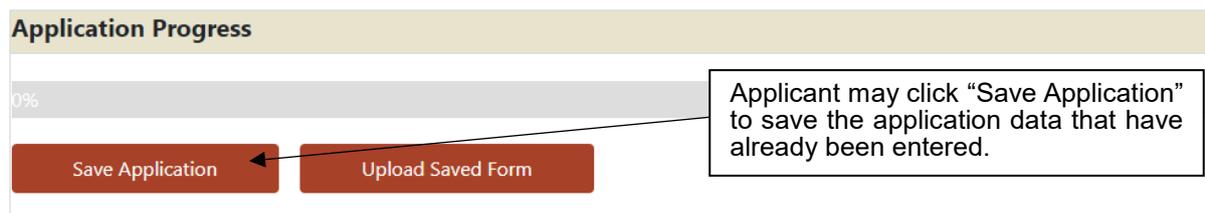
Applicant and/or his / her spouse may also choose to sign the Declaration on paper. Applicant and/or his / her spouse may print the Declaration, sign in the appropriate space provided on the Declaration in black or blue ink and scan the signed Declaration as one of the supporting documents for submission.

After completing all items in Part VIII, please click “Next Page” to proceed to the following part.

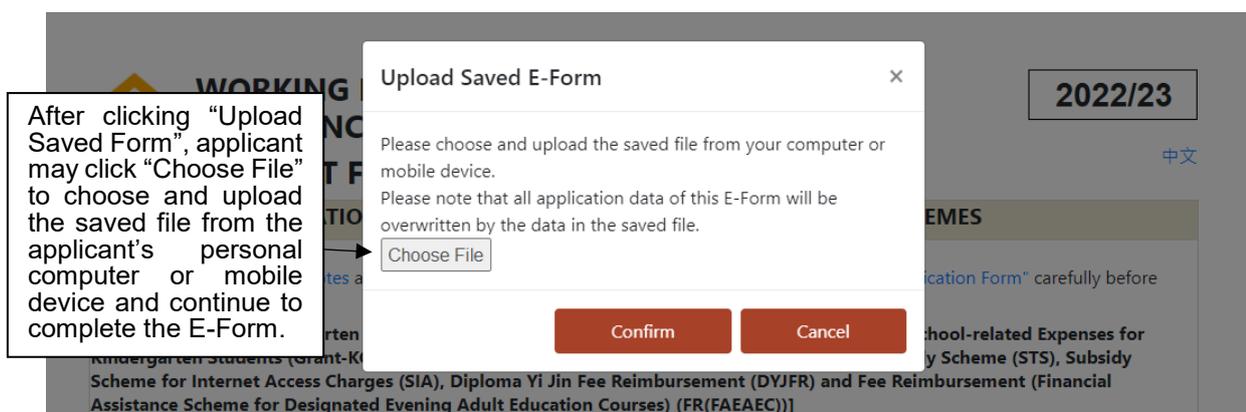
Previous Page Next Page Print Declaration

## Saving and Uploading E-Form

- 11.1 If applicant needs to save the unfinished E-Form for completion later, please click “Save Application” to download the application data that have already been entered. The application data will be saved in the applicant’s personal computer or mobile device as a “.sfo” file. Applicant should record the location of the saved file to facilitate subsequent retrieval and continual completion of the E-Form.



- 11.2 If applicant wants to restore the application data from a saved file, please click “Upload Saved Form” to choose and upload the saved file from the applicant’s personal computer or mobile device. Applicant may continue to complete the E-Form after uploading the saved file.



## Reviewing Completed E-Form

12.1 Applicant should review all the information on the E-Form to ensure that all the data entered are correct.

To ensure that all the data entered are correct, applicant should review all the information on the E-Form. If applicant needs to amend the information of the E-Form, please click "Modify" at the relevant Part and re-enter the relevant information.

After reviewing and confirming all the completed information on the E-Form is correct, please go to Part VIII and click "Next Page" to proceed to "Supporting Documents" to upload necessary supporting document(s) (if any).

[Part I Particulars of the Applicant](#)   [Part II Particulars of Family Members and Financial Assistance Schemes being Applied for](#)  
[Part III Residential Address](#)   [Part IV Family Income](#)   [Part V Medical Expenses Incurred by Family Member\(s\) with Chronic Illness](#)  
[Part VI Applicant's Bank Account for Payment of Assistance](#)   [Part VII Applicant's Supplementary Information](#)   **Part VIII Declaration**

### Part VIII Declaration

*(Applicant and spouse of applicant may choose to provide electronic signatures by "iAM Smart" or click "Print Declaration" to print and sign on the printed copy of the declaration. If applicant and spouse of applicant choose to sign on the printed declaration, applicant should attach and submit the signed declaration under the "Supporting Documents" page.)*

I / We have read the "Household Application for Student Financial Assistance Schemes - Guidance Notes" (GN) and "Notes on How to Complete and Return Electronic Household Application Form" (Notes). I / We fully understand and agree to the arrangements stated therein in relation to my / our application. I / We undertake and warrant that I / we shall comply with all provisions in the GN and Notes as may be amended by the Government of the Hong Kong Special Administrative Region (HKSAR) from time to time and such other requirements and directions as specified from time to time by the Government of the HKSAR. I / We hereby declare that

(a) The information in this application form, supplementary form(s) (if any) and the supporting documents and all other information and representation provided or made by me / us in relation to my / our application are true, complete and accurate. I / We understand and consent that (i) the SFO will assess the eligibility and assistance level of my family based on the information provided by me / us; (ii) the SFO may conduct authentication of my / our application (including home visits and random checking and take other actions as necessary) to investigate and verify whether the information provided in relation to my / our application is true, complete and accurate. I shall fully cooperate, and shall procure my family members to fully cooperate with staff of the SFO; and (iii) the SFO may make adjustment to the assistance level / amount of financial assistance granted based on the findings of the authentication. Any misrepresentation, concealment of facts, provision of misleading or false information or intentional obstruction of the authentication conducted by SFO staff may lead to revocation of an issued eligibility certificate and withdrawal of the letter notifying the result of my / our application, restitution in full of the assistance granted and possible prosecution. I / We undertake to refund in full the Government of the HKSAR any overpayment of financial assistance granted to me / us under any of the financial assistance schemes and loan schemes administered by the SFO, regardless of the cause for such overpayment, immediately upon request. I / We also agree that if any overpayment was made to me / us or any amount was due to be paid by me / us to the Government under or in connection with any of the financial assistance schemes and loan schemes administered by the SFO, the SFO may set off the amount overpaid or the amount due against the financial assistance which I am / we are entitled to under any financial assistance scheme(s) administered by the SFO.

(b) I / We give consent to the SFO and its authorized bodies (including but not limited to relevant government bureaux / departments such as the Education Bureau (EDB), Social Welfare Department (SWD), the agents of the SFO / EDB, the schools / institutions concerned, etc.) to process my / our application and use the personal data provided to the SFO in connection with this application form and supplementary form(s) (if any) in accordance with Paragraph 5 of the GN and to liaise with related parties to verify and disclose the information provided by me / us.

(c) I am / We are authorized by all the family members listed in this application form to give consent and hereby give consent on their behalf to the SFO and its authorized bodies to access such family members' personal data in accordance with Paragraph 5 of the GN and to liaise with related parties to verify and disclose the information provided to the SFO. I / We consent to the SFO and the SWD to carry out the matching procedure for the purposes of processing the application and the granting of other student financial assistance, which may include the recovery of overpayment(s) (if applicable) from me / us.

This declaration shall be governed by and construed in accordance with the laws of the HKSAR. I / We and the Government of the HKSAR shall irrevocably submit to the jurisdiction of the Courts of the HKSAR. I / We have read the provisions of this declaration carefully and fully understood my / our obligations and liabilities under this declaration.

Applicant's Identity Document No. \*

A1234567

Date

XX/XX/20XX

Spouse's Identity Document No. \*

B1234567

Date

XX/XX/20XX

Previous Page   Next Page   **Modify**   Print Declaration

If applicant needs to amend the information of the E-Form, please click "Modify" at the relevant Part and re-enter the relevant information.

After reviewing and confirming all the completed information on the E-Form is correct, please go to Part VIII and click "Next Page" to proceed to the following part.

## Submitting E-Form and Supporting Documents

13.1 Applicant may upload necessary supporting document(s) and submit them together with the completed E-Form.

**Signed Declaration (If the form is printed and signed)**

Choose or "drag and drop" files here  
Accepted format: JPEG, PDF  
(Maximum number of uploaded file: 50)

**Identity documents of the applicant**

Choose or "drag and drop" files here  
Accepted format: JPEG, PDF  
(Maximum number of uploaded file: 50)

**Identity documents of the applicant's spouse**

Choose or "drag and drop" files here  
Accepted format: JPEG, PDF  
(Maximum number of uploaded file: 50)

**Other supporting documents**

Choose or "drag and drop" files here  
Accepted format: JPEG, PDF  
(Maximum number of uploaded file: 50)

Please upload each type of supporting document(s) (if any) separately by clicking the buttons under their respective titles to choose the file(s) of scanned copy of supporting document(s) in your computer/mobile device or directly drag the file(s) to the relevant box(es).

Other than the listed types of documents, applicant may submit other relevant supplementary information to the SFO in the "Other supporting documents" field.

Please enter the verification code listed below for authentication.

**Please enter the verification code listed below for authentication.**

2766 Please click here to generate another verification code image.

Please double-check if the inputted information and uploaded supporting documents are correct before submission.

Applicant may submit the completed E-Form and relevant supporting documents (if applicable) by clicking "Submit" after checking all the inputted information and uploaded supporting documents are correct.

Back Preview Submit

**Confirmation of E-Form Submission**

Your E-Form application will be submitted to the Student Finance Office.  
If you wish to provide other supporting documents and/or supplementary information to the Student Finance Office after the submission, you may send them to Tsimshatsui PO Box 96824 by post.

Please click "Confirm" to confirm the submission of the completed E-Form and relevant supporting documents (if applicable).

Confirm Cancel

## Submission Details

Your Electronic Household Application Form for Student Financial Assistance Schemes has been received by the Student Finance Office. Please quote the transaction reference number below for future communication related to this submission, including any enquiries or subsequent submission of supporting documents.

As you have submitted your electronic application form already, please do not complete and submit other paper-based application forms.

**Submission Date and Time (YYYY-MM-DD HH:MM:SS):** 20XX-XX-XX HH:MM:SS

**Transaction Reference Number:** SFOXXXXXXXXXXXX

This message will be displayed upon completion of submission. Applicant may print this page for record purpose.



Applicant may also download a copy of the submitted E-Form for reference.

- 13.2 For online uploading of documents, please ensure that the scanned documents are clear and legible and take note of the following file formats and uploading limit:
- File types: Portable Document Format (PDF) or Joint Photographic Expert Group (JPEG); or
  - Image resolution: 150 – 300 dots per inch (dpi); and
  - Total File Uploading Limit for all the documents: 40 Megabytes<sup>2</sup>
- 13.3 (i) Applicable to Applicants of Financial Assistance for Primary and Secondary Students  
Please submit the completed E-Form with copy of the relevant supporting documents to the SFO according to Paragraphs 13.1-13.2 of this Notes **on or before 31 May 2022**. If applicants wish to submit relevant supporting documents by post, they may send copy of the relevant supporting documents separately by post to Tsimshatsui PO Box 96824. Please state clearly the Household Application Number (or the HKID Card No. of the applicant) on the supporting documents and affix sufficient postage on the envelopes. Insufficient postage will lead to non-delivery of the supporting documents, in which case the SFO will not be able to process the application. Applicants should write their correspondence address at the back of envelopes to avoid wrong / unsuccessful delivery.
- (ii) Applicable to Applicants of Financial Assistance for Pre-primary Students  
Applicants should submit the completed E-Form with copy of the relevant supporting documents to the SFO according to Paragraphs 13.1-13.2 of this Notes **before the completion of attending classes in the 2022/23 school year or not later than 15 August 2023, whichever is the earlier**. If applicants wish to submit relevant supporting documents by post, they may send copy of the relevant supporting documents separately by post to Tsimshatsui PO Box 96824. Please state clearly the Household Application Number (or the HKID Card No. of the applicant) on the supporting documents and affix sufficient postage on the envelopes. Insufficient postage will lead to non-delivery of the supporting documents, in which case the SFO will not be able to process the application. Applicants should write their correspondence address at the back of envelopes to avoid wrong / unsuccessful delivery. The effective month of fee remission will be the month in which the application forms are submitted by the applicants, or the month in which the student-applicants are admitted to the kindergartens / child care centres, whichever is the later.
- 13.4 Required supporting documents include:
- Copy of identity documents** of the applicant and his / her family members (including the dependent parent(s) (if applicable)) as listed in Part II<sup>3</sup>;
  - (For single-parent families)** Copy of supporting documents for separation / divorce or the spouse's Death Certificate. If applicants are unable to provide the supporting documents, please explain in writing the reasons and sign on an explanatory note; if applicant is unable to provide the required supporting documents, the SFO reserves the right to process the application on the basis that the applicant is not treated as a single parent;
  - (If applicable) Copy of documentary proof on unavoidable **medical expenses** (for family members who are chronically ill or permanently incapacitated) for the period from 1 April 2021 to 31 March 2022;

<sup>2</sup> In case the total file size exceeds the uploading limit, please consider increasing the image compression level, or lowering the resolution of the JPEG files to decrease the file size, where appropriate.

<sup>3</sup> If applicant or the family member(s) meet the following requirements, it is not required to submit the supporting document(s). If necessary, the applicant may still be required to resubmit the relevant document(s). In case of any disputes, the decision of the SFO will be final.

- Applicant / the family member(s) has / have a successful application under the financial assistance scheme of the SFO and has / have submitted a copy of their HKID Card in the above successful application; and
- There is no change in personal particulars on the HKID Card.

- (iv) Please provide copy of the **bank statement / first page of bank book**<sup>4</sup>; and  
 (v) Documentary proof on total income for the period from 1 April 2021 to 31 March 2022. Please submit the document in accordance with the requirements listed below:

Salaried employed person	<ol style="list-style-type: none"> <li>(1) Tax Demand Note issued by the Inland Revenue Department; if not available</li> <li>(2) Employer's Return of Remuneration and Pensions Form; if not available</li> <li>(3) Salary Statement; if not available</li> <li>(4) Bank transaction record showing payment of salary, allowance, etc. (together with the page showing the name of bank account holder) (Please highlight the entries with colour and remarks. For any entries other than income, please also make necessary remarks next to them, or else the SFO may include the amount in calculating family income); if not available</li> <li>(5) Income Certificate certified by the employer (See Sample I), etc.</li> </ol>
Self-employed driver or person running business (including sole proprietorship business / partnership business / limited company)	<ol style="list-style-type: none"> <li>(1) Profit and Loss Account verified by a Certified Public Accountant; if not available</li> <li>(2) Profit and Loss Account prepared on your own (See Sample II or III) <u>and</u></li> <li>(3) Personal Assessment Notice (if applicable).</li> </ol>
Salaried employed or self-employed person who cannot produce any income proofs	Please follow Sample IV to provide Self-prepared Income Breakdown detailing your monthly income throughout the year and explaining why income proof cannot be produced. (The SFO reserves the right to decide whether applications from those applicants who cannot provide justification for not producing income proof would be accepted.)
Person with rental income	<ol style="list-style-type: none"> <li>(1) Tenancy Agreement; if not available</li> <li>(2) Bank transaction record showing rental income (together with the page showing the name of bank account holder) (Please highlight the entries with colour and remarks. For any entries other than income, please also make necessary remarks next to them, or else the SFO may include the amount in calculating family income).</li> </ol>

## Enquiries

- 14.1 If applicant has any enquiry relating to the completion and submission of E-Form or has not received any acknowledgement of receipt of application by means of SMS or in writing from the SFO within 20 working days after submitting E-Form online, please call our 24-hour enquiry hotline at 2802 2345.

<sup>4</sup> If applicant meets the following requirements, it is not required to submit the supporting document. If necessary, the applicant may still be required to resubmit the relevant document. In case of any disputes, the decision of the SFO will be final.

- Applicant has a successful application under the financial assistance scheme of the SFO and was disbursed with payment of grant and/or loan to his / her bank account while the applicant has submitted a copy of bank account proof in the above successful application; and
- Applicant uses the same bank account in the application for the 2022/23 school year (i.e. the above bank account which has been disbursed with grant and/or loan).

## Sample I: Income Certificate

(For salaried employed person who cannot provide items 1 - 4 of income proof as listed in Paragraph 13.4 (v) of the Notes)

**(Can be filled in directly)**

**WARNING :** The personal data given in this statement should be true and complete. Any person who obtains property / pecuniary advantage by deception is liable on conviction to imprisonment for a maximum of 10 years under the Theft Ordinance, Chapter 210.

### INCOME CERTIFICATE

This is to certify that \_\_\_\_\_ ( HKID Card No. \_\_\_\_\_ ) is employed by this company as \_\_\_\_\_. His / Her total salary (including allowance, bonus, double pay, leave pay and other income (including Hong Kong, the Mainland and overseas), **but excluding Mandatory Provident Fund / Provident Fund contribution by employee, in actual figure**) during the period from 1 April 2021 to 31 March 2022 (please specify the exact employment period within the above-mentioned period if it was less than 12 months: \_\_\_\_\_ to \_\_\_\_\_) is \*HK\$\_\_\_\_\_.

# The above employee works \_\_\_\_\_ hours per month / full-time in this company (120 working hours or above per month) (only applicable to application of whole-day kindergarten / child care centre fee remission for the group aged 0-3).

Signature of Employer: \_\_\_\_\_ Name of Employer: \_\_\_\_\_

Company Chop: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Company Address: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

(Note: The original copy of this Certificate must bear the company chop and telephone number of the employer. Employer's initial is required against any deletion / amendment.)

\* Please specify the currency if salary paid is not in Hong Kong dollars.

# Please delete the inappropriate sentence.

## INCOME CERTIFICATE

This is to certify that \_\_\_\_\_ ( HKID Card No. \_\_\_\_\_ ) is employed by this company as \_\_\_\_\_. His / Her total salary (including allowance, bonus, double pay, leave pay and other income (including Hong Kong, the Mainland and overseas), **but excluding Mandatory Provident Fund / Provident Fund contribution by employee, in actual figure**) during the period from 1 April 2021 to 31 March 2022 (please specify the exact employment period within the above-mentioned period if it was less than 12 months: \_\_\_\_\_ to \_\_\_\_\_) is \*HK\$\_\_\_\_\_.

# The above employee works \_\_\_\_\_ hours per month / full-time in this company (120 working hours or above per month) (only applicable to application of whole-day kindergarten / child care centre fee remission for the group aged 0-3).

Signature of Employer: \_\_\_\_\_ Name of Employer: \_\_\_\_\_

Company Chop: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Company Address: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

(Note: The original copy of this Certificate must bear the company chop and telephone number of the employer. Employer's initial is required against any deletion / amendment.)

\* Please specify the currency if salary paid is not in Hong Kong dollars.

# Please delete the inappropriate sentence.

**WARNING :** The personal data given in this statement should be true and complete. Any person who obtains property / pecuniary advantage by deception is liable on conviction to imprisonment for a maximum of 10 years under the Theft Ordinance, Chapter 210.

**Sample II: Profit & Loss Account**

(For self-employed taxi driver / lorry driver / minibus driver etc.)

**(Can be filled in directly)**

Name of family member engaged in the following business : \_\_\_\_\_

Taxi driver / Lorry driver / Minibus driver (please circle)

Vehicle owner / Vehicle lessee (please circle)

License number (for vehicle owner only) : \_\_\_\_\_

**(I) Profit and Loss Account**  
(From 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022)

**Income (HK\$)**

1. Rent (for vehicle owner only)	\$	_____
2. Profit from operating business	\$	_____
3. Others (please specify all items & breakdown of amounts)	\$	_____
_____		
(A) Total Income	\$	_____

**Expenditure (excluding vehicle mortgages) (HK\$)**  
(1 & 2 are applicable to vehicle lessee, 2 to 5 are applicable to vehicle owner)

1. Vehicle rental fee	\$	_____
2. Fuel charges	\$	_____
3. Insurance premium	\$	_____
4. Maintenance fee	\$	_____
5. License fees	\$	_____
6. Others (please specify all items & breakdown of amounts)	\$	_____
_____		
(B) Total Expenditure	\$	_____

**Net profit [(A) Total Income – (B) Total Expenditure\*]**

\$ \_\_\_\_\_

(This amount should be filled in Part IV of the Household Application Form.)  
\* If Total Income is less than Total Expenditure (i.e. (A) – (B) < 0), deficit will not be counted i.e. business loss cannot be deducted from the gross household income.

Remark (reason for not being able to provide income proof) : \_\_\_\_\_

---

**(II) Monthly Working Hours (Only applicable to application of whole-day kindergarten / child care centre fee remission for the group aged 0-3)**

Working \_\_\_\_\_ hours per month.

Signature of family member engaged in the above business (if not the applicant) : \_\_\_\_\_

Applicant's Name : \_\_\_\_\_

Applicant's HKID No : \_\_\_\_\_

Applicant's Signature : \_\_\_\_\_

Date : \_\_\_\_\_

**Sample III: Profit & Loss Account**

(For person running business (including sole proprietorship / partnership business))

**(Can be filled in directly)**

Name of family member running the following company (Owner) : \_\_\_\_\_

Company name : \_\_\_\_\_

Nature of business : \_\_\_\_\_

Company address : \_\_\_\_\_

Sole proprietorship or partnership : \_\_\_\_\_ ( \_\_\_\_\_ %)

(If it is a partnership, please specify the profit sharing ratio, e.g. Partnership (50%))

**(I) Profit and Loss Account**  
(From 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022)

(A) **Gross Income (HK\$)** \$ \_\_\_\_\_

**Expenditure (HK\$)**  
(The following is the running cost of the company and should not cover any household expenses.)

Cost on purchasing merchandise	\$	_____
Water charges	\$	_____
Electricity charges	\$	_____
Gas charges	\$	_____
Telephone charges	\$	_____
Rent and rates	\$	_____
Salary of employees other than those marked '#' below	\$	_____
Transportation costs	\$	_____
Traveling expenses	\$	_____
Insurance premium	\$	_____
Fees for repair and maintenance of machinery	\$	_____
Others (please specify all items & breakdown of amounts)	\$	_____
_____		

**Other Expenditure (HK\$)**

# Salary of owner paid by this company	\$	_____
# Salary of other family member paid by this company (Name : _____)	\$	_____
_____		

(B) **Total Expenditure (HK\$)** \$ \_\_\_\_\_

Household Income = (A) Gross Income – (B) Total Expenditure\* + Salary of owner / other family member paid by this company#  
= HK\$ \_\_\_\_\_

(This amount should be filled in Part IV of the Household Application Form.)  
\* If Gross Income is less than Total Expenditure (i.e. (A) – (B) < 0), deficit will not be counted i.e. business loss cannot be deducted from the gross household income.

Remark (reason for not being able to provide income proof) : \_\_\_\_\_

---

**(II) Monthly Working Hours (Only applicable to application of whole-day kindergarten / child care centre fee remission for the group aged 0-3)**

Working \_\_\_\_\_ hours per month.

Owner's Signature (if not the applicant) : \_\_\_\_\_

Applicant's Name : \_\_\_\_\_

Applicant's HKID No : \_\_\_\_\_

Applicant's Signature : \_\_\_\_\_

Date : \_\_\_\_\_

Sample IV: Self-prepared Income Breakdown  
 (For hawker / construction worker / renovation worker / casual worker / cleaner  
 who cannot provide income proof)  
 (Please fill in all of the following items)  
 (Can be filled in directly)

**WARNING :** The personal data given in this statement should be true and complete. Any person who obtains property / pecuniary advantage by deception is liable on conviction to imprisonment for a maximum of 10 years under the Theft Ordinance, Chapter 210.

Name of the family member engaged in the : \_\_\_\_\_  
 following business \_\_\_\_\_

(Each self-prepared income breakdown **should contain the income information of ONE family member only.**)

The relationship between this family member and the applicant : \* Applicant / Spouse / Child  
 (\* please delete the inappropriate items)

Nature of Industry (e.g. Construction) : \_\_\_\_\_

Position (e.g. construction worker) : \_\_\_\_\_

Actual Income

**(Please fill in actual figure.** If you do not have any income in a specific month, please fill in \$0. Do not leave any month blank. In addition, for payment made in arrears, for instance, if the payment date of your salary for April is in May, you should fill in the salary amount in the month of April, etc.)

<u>2021</u>	<u>2022</u>
April :HK \$ _____	September :HK \$ _____
May :HK \$ _____	October :HK \$ _____
June :HK \$ _____	November :HK \$ _____
July :HK \$ _____	December :HK \$ _____
August :HK \$ _____	January :HK \$ _____
	February :HK \$ _____
	March :HK \$ _____

Total Annual Income HK \$ : \_\_\_\_\_

Payment method (Please put "✓" in the appropriate box. More than one item may be selected)

- A. By Cash / Cash cheque
- B. By Cheque / direct credit (Please provide a copy of the transaction record together with the page showing the name of the bank account holder, **circle the entries and highlight the total amount with color** for verification. For any entries other than income, please also **make necessary remarks next to them, or else the SFO may include the amount in calculating your family income.**)

Reason for not being able to provide income proof (Please put "✓" in the appropriate box.)

- A. I have no fixed employer.
- B. The company I worked for has wound up and I cannot obtain documentary proof from the ex-employer and do not have any other income proof.
- C. Others, please specify : \_\_\_\_\_

Monthly Working Hours (Only applicable to application of whole-day kindergarten / child care centre fee remission for the group aged 0-3)  
 Working \_\_\_\_\_ hours per month.

**Declaration : I declare that the above information is true and complete.**

Signature of family member engaged in the above business (if not the applicant) : \_\_\_\_\_

Applicant's Name : \_\_\_\_\_ Applicant's HKID No : \_\_\_\_\_  
 Applicant's Signature : \_\_\_\_\_ Date : \_\_\_\_\_