

Working Family and Student Financial Assistance Agency

Notes on How to Complete and Return Household Application Form (Pre-filled 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.
- Applicants, their family members or agents must not offer an advantage, including money or gifts, to any government officer in connection with their applications or while having dealings of any kind with Government bureaux / departments; or else, they may commit an offence under section 4(1) and / or section 8 of the Prevention of Bribery Ordinance (Chapter 201 of the Laws of Hong Kong), and be liable to a maximum penalty of a fine of \$500,000 and imprisonment for seven years.

IMPORTANT NOTES

I. General Information

- Please check all pre-filled data in the shaded area of the Household Application Form and make necessary amendments according to the instructions stated in the Form and this Notes.
- “Assessment year” mentioned in this Notes generally refers to the preceding financial year. The assessment year for 2025/26 application refers to the 2024-25 financial year (1.4.2024 – 31.3.2025).

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 9.2 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.

Completion of Household Application Form

1. 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)

Please check the pre-filled data in the shaded area. If necessary, applicant may provide updated information in block letters or Chinese characters (if applicable) in the spaces provided on right-hand side.

1. Name in Chinese	陳大文		Applicant must provide the correct correspondence address. Otherwise, the SFO will not be able to contact the applicant in writing. If the 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 the applicant is not residing in Hong Kong, please provide a Hong Kong correspondence address for future correspondence.											
3. Name in English	CHAN TAI MAN													
4. Correspondence Address			(Please fill out in English)											
	FLAT A, 12/F		Flat	C			Floor	2	2		Block			
Name of Building	HAPPY HOUSE		H	A	P	P	Y	H	O	U	S	E		
Estate / Village	HARMONY ESTATE													
No. & Name of Street			To facilitate the SFO to issue acknowledgement of receipt of applications and the related payment information (if applicable) by means of SMS, please verify the applicant's Hong Kong mobile phone number. If necessary, applicant may cross out the pre-filled data and provide the updated Hong Kong mobile phone number in the spaces provided on right-hand side.											
District	SHAM SHUI PO		If the applicant is not a holder of the Hong Kong Identity Card, please provide other identity document type and number according to Paragraph 1.1 of this Notes.											
Area	KLN													
5. Year of Birth	1970													
6. HKID Card No.	A123456(7)		(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 1.1 of "Notes on How to Complete and Return Household Application Form")											
			Other Identity Document No.:											
			(The SFO will send various notifications by means of SMS. Please fill in the phone number that can receive SMS.)											
7. Home Tel No. @	1234 5678													
8. HK Mobile Phone No.	1234 5678													
9. Email Address	chantm@gmail.com													

☒ A. Married <i>(Please provide spouse's information in Part II)</i> Please fill in the marital status during the assessment year. If applicant is "Married", please put "✓" in the box next to item (A).	☐ B. * Divorced / Separated / Widowed / Single / Others (Please specify : _____) <i>(Please provide copies of supporting documents, and spouse's information need <u>not</u> be provided in Part II)</i> If applicant is a single-parent during the assessment year, please follow the example below, put "✓" in the box next to item (B) and <u>delete the inapplicable status</u>. ☒ B. * Divorced / Separated / Widowed / Single / Others (Please specify : _____) <i>(Please provide copies of supporting documents, and spouse's information need <u>not</u> be provided in Part II)</i>
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11. ☐ Paper-based application form is needed in the next school year
(Note: Applicants who do not put "✓" in the box will be treated as opting for electronic application form in the next school year. To facilitate application and for environmental protection, the SFO encourages applicants to submit electronic application.)

Applicants who do not put “✓” in the box will not receive paper-based pre-filled application form from the SFO in the next school year. To facilitate submission of electronic application, the SFO will issue an Access Code for getting the pre-filled electronic application form online and other relevant information to applicants concerned by batches from around mid March 2026.

- 1.1 If the applicant is not a holder of the Hong Kong Identity Card, please fill in the item of "Other Identity Document Type" using the following codes and provide the relevant identity document number with copy of the identity document:

Passport	0 2	Re-entry Permit	0 3	Certificate of Identity	0 4
Document of Identity	0 5	Entry Permit	0 6	Declaration of ID for Visa Purpose	0 7
One-way Permit	0 8	Mainland identity documents	0 9	Others	9 9

- 1.2 If applicant's spouse wishes to be the applicant, please delete the pre-filled data in the shaded area, provide the information of the new applicant in the spaces on the right-hand side and amend the data of spouse in Part II A accordingly. If applicant and his / her spouse (i) have already submitted copies of their identity documents in the application in previous year in which the identity documents are still valid and there is no change in personal particulars on the identity documents, or (ii) are holders of the Hong Kong Identity Card, it is not required to submit the copy of the identity documents this school year.

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

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

A. Spouse 1. Name in Chinese 2. Name in English 3. Year of Birth 4. HKID Card No.		黃小芬 WONG SIU FAN 1972	Please check the pre-filled data in the shaded area. If necessary, applicant may provide updated information of his / her spouse in block letters or Chinese characters (if applicable) in the spaces provided on right-hand side.	If the spouse is not a holder of the Hong Kong Identity Card, please provide other identity document type and number according to Paragraph 1.1 of this Notes.
5. HK Mobile Phone No. @ 1234 5678		(If HKID Card No. is not available, please provide Other Identity Document No. with copy of relevant proof.) Other Identity Document Type: 0 5 Other Identity Document No.: D 1 2 3 4 5 6 7 8		

If applicant wishes to apply for financial assistance for the child in this school year (including KCFRS, Grant-KG, TA, STS, DAEFR / DYJFR and FR(FAEAC)), please put "✓" in the appropriate box(es) under items 5, 8 and 9.

Please delete the pre-filled data of the children who are no longer residing with applicant's family or have got married. **If applicant needs to add unmarried child residing with the family, please insert the details of the new member in the appropriate boxes and attach copies of the identity documents (if applicable).**

B. Student-applicants and unmarried children residing with the family (Details of student-applicant(s) and unmarried child(ren) residing with the family are pre-filled below from the youngest child if there is more than one child in ascending order. Please do not amend the pre-filled order and fill out the details of the additional child(ren) in the last part of this section.)					
		Student-applicant 1 / Unmarried child residing with the family 1		Student-applicant 2 / Unmarried child residing with the family 2	
1. Name in Chinese	陳小芳			陳大	
2. Name in English	CHAN SIU FONG			C H A N T A I	
3. Date of Birth	1/1/2010			D 0 1 M 0 1 Y 2 0 0 5	
4. HKID Card No. / Birth Certificate No.	D123456(7)			C 1 2 3 4 5 6 (7)	
Other Identity Document Type					
Other Identity Document No.					
5. Status for 2024-25	☒ A. Under education ☐ B. In employment ☐ C. Unemployed ☐ D. Other			☒ A. Under education ☐ B. In employment ☐ C. Unemployed ☐ D. Other	
6. Name of School / Institution in 2025/26	NUMBER ONE SECONDARY SCHOOL			Y J	
7. Class level in 2025/26	S4				
8. Mode of study	☒ A. Whole-day ☐ B. Half-day (A.M. session) ☐ C. Half-day (P.M. session) ☐ D. Part-time			☐ A. Whole-day ☒ B. Half-day (A.M. session) ☐ C. Half-day (P.M. session) ☒ D. Part-time	
9. Apply for schemes	☒ Need ☐ Do not need			☒ Need ☐ Do not need	
(On student basis and you may choose more than 1 item, if applicable)					
# Kindergarten & below levels:		(1) KCFRS + (2) Grant-KG [^] (^ Grant-KG only applicable to KG students (K1-K3))		# Kindergarten & below levels:	
# Primary & secondary levels or equivalent:		(3) TA ☒ (4) STS ☐ (5) DAEFR / DYJFR ☐ (6) FR(FAEAC)		# Primary & secondary levels or equivalent:	
				(3) TA ☐ (4) STS ☒ (5) DAEFR / DYJFR ☐ (6) FR(FAEAC)	

The SFO has pre-filled the information of school and class level according to the application of preceding school year, and on the assumption that the child will be promoted to the next higher class level in the existing school in September this school year. Applicants do not need to delete / amend the pre-filled information for the time being if the name of school / class level is not yet confirmed at the time when the application is submitted.

If applicant wishes to apply for financial assistance for pre-primary students (including (1) KCFRS and (2) Grant-KG), please put "✓" in the 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.

- 2.1.1 If applicant has more than 4 unmarried children residing with him / her, please check whether Household Application Form for Student Financial Assistance Scheme(s) – Supplementary Information [SFO 179E] containing pre-filled data of all the children is received. If not, applicant should supplement information of the remaining unmarried child(ren) by appending a separate sheet with the applicant's signature.

- 2.1.2 Applicant's spouse and children in receipt of Comprehensive Social Security Assistance (CSSA) will not be included as 'family members' under the Adjusted Family Income (AFI) mechanism.
- 2.1.3 (Applicable to applicants of Student Travel Subsidy (STS) only) For assessment of STS, the SFO has pre-filled the term-time residential address of student who has successfully applied for STS in the preceding school year on the supplementary form [SFO 283E]. If applicant wishes to continue to apply for STS in this school year, please verify the pre-filled address. If there is any amendment to the address or the pre-filled address is not the student-applicant's term-time residential address (e.g. the student-applicant is living in hostel provided by schools, parents or other organizations, or living with other relatives in another location), please amend the student-applicant's residential address in full by filling in the boxes provided on the right-hand side. The SFO may require the applicant to submit proof of the residential address at a later stage. Please sign and fill in the date at the bottom of the supplementary form, and send it to the SFO together with the application form.
- Note: For a student who was not disbursed with STS in the preceding school year but wishes to apply for STS in this school year, the applicant should select "(4) STS" under item 9 of Part IIB for the student. The applicant should also put "✓" under items 5 and 8 of Part IIB and provide the term-time residential address of the student in Part III (if different from the correspondence address) so that the SFO may verify the data with the school concerned.
- 2.1.4 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 Social Welfare Department, Education Bureau, the Hong Kong Jockey Club, public transport companies, etc. If it is subsequently discovered that the student-applicant is benefiting from double subsidies, the applicant is liable to refund the overpaid amount upon the request of the SFO. If the student who has successfully applied for STS later changes to be a boarder or live in a hostel provided by the school during term-time, the applicant should inform SFO as soon as possible for re-calculation of the amount of travel subsidy for the student concerned.
- 2.1.5 Applicant should fill in the class level attended by his / her child(ren) in this school year using the following codes:
- | | | | |
|--------|--|---|---|
| (i) | Whole-day Child Care Centre (group aged 0-2) | N | 1 |
| (ii) | Whole-day Child Care Centre (group aged 2-3) | N | 2 |
| (iii) | Nursery class in kindergarten | K | 1 |
| (iv) | Lower class in kindergarten | K | 2 |
| (v) | Upper class in kindergarten | K | 3 |
| (vi) | Primary 1 to 6 | P | 1 |
| (vii) | Secondary 1 to 3 | S | 1 |
| (viii) | Secondary 4 to 6 | S | 4 |
| (ix) | Diploma of Applied Education/Diploma Yi Jin | Y | J |
| (x) | Others (e.g. Tertiary Level) | O | L |
- | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| P | 2 | P | 3 | P | 4 | P | 5 | P | 6 |
| S | 2 | S | 3 | S | 4 | S | 5 | S | 6 |

C. Subsidy for Internet Access Charges (SIA)

- 2.3 Dependent parent
- 2.3.1 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 and not in employment during the assessment year. They must, throughout the assessment year, 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.

parent(s). Applicant needs not fill out the information of his / her deceased parent(s)). As the number of family members may affect directly the level of assistance the applicant's family is eligible for, applicants are required to provide supporting documents including tenancy agreement, residential address proof or receipt of the home for the elderly, etc. for verification of the dependence of the parents for the SFO's consideration.

- 2.3.2 **If applicant or his / her spouse has dependent parent(s)**, please submit copies of the identity documents of the dependent parent(s) provided in the form. Otherwise, please do not fill out this part. If applicant (i) has already submitted copies of the identity documents of the dependent parent(s) in the application in previous year in which the identity documents are still valid and there is no change in personal particulars on the identity documents, or (ii) the dependent parent(s) is / are holder(s) of the Hong Kong Identity Card, it is not required to submit the copy of the identity documents this school year.

Please fill in the personal particulars of dependent parent(s) and provide a copy of their identity documents (if applicable).

Please put "✓" in the appropriate box. If "yes", please skip Part "D". If "no", please continue to complete Part "D" and refer to Paragraph 2.3.1 of this Notes for definition of "Dependent Parent".

D. Dependent Parent (If you / your spouse have dependent parent(s), please fill out this section, otherwise do not fill out the spaces below.)

- (i) Is/Are the dependent parent(s) currently in receipt of the Comprehensive Social Security Assistance (CSSA) and/or (ii) under employment during the assessment period?
☐ Yes (Need not complete Part "D") ☒ No (Continue to complete Part "D" and refer to Paragraph 2.3 of "Notes on How to Complete and Return Household Application Form" on the definition of "Dependency")

Name of Dependent Parent	HKID Card No. and Year of Birth (Please refer to paragraph 2.3.2 of "Notes on How to Complete and Return Household Application Form" and provide copy (if applicable))	Dependency Status (Please put "✓" in the appropriate box)		
		at least 6 months during 1.4.2024 to 31.3.2025	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	Resided in premises owned or rented by the applicant or his / her spouse
(1) Name in Chinese: 陳 大 福	HKID Card No.: E 1 2 3 4 5 6 (7)	☒	☐	☐
(2) Name in English: C H A N T A I F U K	Other Identity Document Type: (Please refer to paragraph 1.1 of "Notes on How to Complete and Return Household Application Form") Other Identity Document No.: Year of Birth: 1 9 4 6	☐	☐	☐

If the dependent parent is not a holder of the Hong Kong Identity Card, please provide other identity document type and number according to Paragraph 1.1 of this Notes.

Applicant should read Paragraph 2.3.1 (A), (B) and (C) of this Notes carefully and put "✓" in the appropriate box(es).

3. Part III Residential Address

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

4. Part IV Family Income

Please complete the fields with position, unemployment, housewife or retirement during the assessment period. If it is not a whole year, please specify the period with reference to the examples.

Please provide the total income (integer without decimal places), for the period from 1 April 2024 to 31 March 2025. **The SFO will not accept estimated amount, and so please provide the actual figure.** For other income source, e.g. rental income (see item 11 under "Items need to be reported" in Paragraph 4.1 of this Notes), contribution from children not residing with the family / relatives / friends, alimony or interests from investments, please state the amount according to the following example.

Applicant and Family Member	Mode of employment	Position / Other (e.g. housewife, unemployed, retired) (Please specify the period if it is not a whole year)	Total Annual Income (\$) (including bonus / allowance / part-time income (excluding Mandatory Provident Fund (MPF) / Provident Fund contribution by employee))	For Office Use
① Applicant	# ☒ Full-time # ☐ Part-time	Unemployed (1.4.2024 – 30.4.2024) Clerk (1.5.2024 – 31.12.2024) Self-employed Driver (1.1.2025 – 28.2.2025) Retired (1.3.2025 – 31.3.2025)	Salary (\$) 8 0 0 0 0 Business profit (\$) 4 5 0 0 0	
② Spouse	# ☐ Full-time # ☒ Part-time	Housewife (1.4.2024 – 30.9.2024) Part-time Cashier (1.10.2024 – 31.3.2025)	Salary (\$) 3 0 0 0 0 Business profit (\$) 0 0 0 0 0	
③ Unmarried child residing with the family (if applicable) Name: CHAN Tai-ming	# ☒ Full-time # ☐ Part-time	Waiter (1.4.2024 – 10.6.2024) Unemployed (11.6.2024 – 31.3.2025)	Salary (\$) 3 6 0 0 0 Business profit (\$) 0 0 0 0 0	
④ Unmarried child residing with the family (if applicable) Name: _____	# ☐ Full-time # ☐ Part-time		Salary (\$) _____ Business profit (\$) _____	
⑤ Other income (if applicable)		Contribution from children not residing together, relatives or friends (\$) 1 2 0 0 0 Rental income of property, land, carpark, vehicle or vessel (\$) 9 6 0 0 0 Interests from investments, fixed deposit (\$) 5 0 0 0 0 Alimony (\$) _____ Pension (excluding lump sum retirement gratuity) (\$) _____ Widow's & Children's Compensation (\$) _____ Others (\$) _____		
Total =			3 0 4 0 0 0	

The total amount is for reference only. The SFO will assess the eligibility of a family for student financial assistance and its assistance level according to the AFI mechanism stated in Paragraph 3 of the Guidance Notes.

- 4.1 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 9.2 (viii) 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>) 2 Double pay / Leave pay 3 Allowance (including overtime work / living / housing or rent / transport / meals / education / shift allowance, etc.) 4 Bonus / Commission / Tips 5 Studentship 6 Wages in lieu of notice of dismissal 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. 8 Alimony 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) 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	1 Financial assistance from the Government, or payment from the assistance programme under the Community Care Fund (such as CSSA / Old age allowance / Old age living allowance / Disability allowance / Retraining allowance / Work Incentive Transport Subsidy / Working Family Allowance etc.) 2 Long service pay / Contract gratuity 3 Severance pay 4 Loans 5 Lump sum retirement gratuity / Provident fund 6 Inheritance 7 Charity donations 8 Insurance / accident / injury indemnity 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>)

- 4.2 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.

5. Part V Medical Expenses Incurred by Family Member(s) with Chronic Illness

(Please provide a copy of supporting document)

Name	Nature of incapacity or chronic illness	Medical expenses incurred within the assessment period (\$)						
CHAN Tai-fuk	Suffering from diabetes and requiring regular medical treatment.	<table><tr><td>1</td><td>0</td><td>4</td><td>0</td><td>0</td><td></td></tr></table>	1	0	4	0	0	
1	0	4	0	0				

- 5.1 If applicant has incurred medical expenses for family members (for family members who are chronically ill or permanently incapacitated) in the assessment year, he / she may state details of the situation in Part V of the application form. Applicant must provide relevant medical certificate(s) and receipt(s) issued by the hospitals / clinics / registered practitioners to the SFO for consideration of deducting such expenses. The ceiling of deductible amount in 2025/26 school year is being reviewed and will be announced on the website of the Working Family and Student Financial Assistance Agency (WFSFAA) (www.wfsfaa.gov.hk) later.

6. Part VI Applicant's Bank Account for Payment of Assistance

(The account must be under the applicant's name. Please provide copy of the bank statement / first page of bank book # if you wish to update the bank account information.)

[illegible]

Please verify the pre-filled bank account information carefully. If any amendment is required, applicant may **cross out the pre-filled data** and write down the correct bank account information in the spaces provided on right-hand side. In addition, applicant must provide relevant supporting document (e.g. photocopy of the first page of the bank passbook / bank statement showing the name of the account holder and the account number #).

- 6.1 The SFO has pre-filled the applicant's bank account information on Part VI of the Household Application Form as provided in the application for the preceding school year. As the SFO will release the Grant for School-related Expenses for Kindergarten Students, School Textbook Assistance, Student Travel Subsidy, Subsidy for Internet Access Charges, Diploma of Applied Education / Diploma Yi Jin Fee Reimbursement and Fee Reimbursement (Financial Assistance Scheme for Designated Evening Adult Education Courses) by auto-pay, the applicant should verify the pre-filled bank account information carefully. If any amendment is required, the applicant may cross out the pre-filled data, write down the correct bank account information in the spaces provided on right-hand side and provide supporting document #. Please note that the SFO bears no responsibility for any delay in receipt of payment / loss in subsidy amount / any additional bank charges arising from any errors the applicant committed in providing the bank account holder's name and / or the bank code and / or account number.
- 6.2 The bank account must be valid local saving account solely under the name of the applicant. (It must be recently in use.) Joint account, credit card account, loan account, fixed-deposit account and foreign currency account are not accepted.
- 6.3 For enquiries of "Bank Code", applicant may approach the bank concerned for assistance.
- 6.4 If applicant needs to change the bank account holder's name and / or the bank account number after submission of the application 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.

(# Applicant must write correctly and clearly the information of the bank account number on the Application Form. Applicant is not required to provide the relevant supporting document if the requirements mentioned in Note 2 of Paragraph 9.2 are met.)

7. Part VII Applicant's Supplementary Information

Please provide details regarding family members in receipt of CSSA or any 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.) in this part with copy of supporting documents. 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 2024 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 1.4.2024 – 30.9.2024. /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 1.5.2025. The family income is substantially reduced after the assessment period which results in financial hardship (see the attached supporting documents).

8 Part VIII Declaration

- 8.1 The applicant and his / her spouse (if applicable) should read through the paragraphs and sign in the space provided in the application form.

Submission of Application and Supporting Documents

- 9.1 The SFO encourages applicants to submit application and copy of the supporting documents online, which is convenient and saves time and money. If applicant using paper-based pre-filled application form, please submit the form with copy of the relevant supporting documents to the SFO by post using the addressed envelope provided. Please affix sufficient postage. Insufficient postage will lead to non-delivery of the application form, in which case the SFO will not be able to process the application. Applicant should write his / her correspondence address at the back of the addressed envelope to avoid wrong / unsuccessful delivery.

9.2 If the pre-filled data is accurate, applicant is not required to provide copies of the family members' identity documents (Note 1).

Other supporting documents that **must** be submitted include:

- (i) Copy of the one-way permit / visa / permit to remain in Hong Kong / Hong Kong Birth Certificate of the **additional student-applicant** if he / she is not a holder of the Hong Kong Permanent Identity Card such as holding one-way permit / dependent visa / other entry visa or is under 11 years old;
- (ii) Copy of identity documents for **any additional family member** (including **dependent parents** (if applicable) as listed in Paragraph 2.3.2 of this Notes) if he / she is not a holder of the Hong Kong Identity Card;
- (iii) Copy of the **amended identity documents** (excluding Hong Kong Identity Card);
- (iv) (For **single-parent families**) Copy of supporting documents for separation / divorce or 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 applicant has declared the situation and submitted relevant supporting documents for separation / divorce or spouse's Death Certificate in the preceding school year, the applicant is still required to declare in writing again that the single-parent family situation remains unchanged in this school year. Where deemed necessary, the SFO may request the applicant to provide such proofs again;
- (v) (If applicable) Copy of **documentary proof on supporting the dependent parents**;
- (vi) (If applicable) Copy of documentary proof on unavoidable **medical expenses** (for family members who are chronically ill or permanently incapacitated) in the assessment year;
- (vii) (If applicable) Please provide copy of the **bank statement / first page of bank book** if it is required to update the bank account information. If the requirements are met, it is not required to submit relevant supporting document of bank account (Note 1 and 2); and
- (viii) **Documentary proof on annual income** for the assessment year. Please submit the document in accordance with the requirements listed below:

Salaried employed person	(1) Tax Demand Note issued by the Inland Revenue Department; if not available (2) Employer's Return of Remuneration and Pensions Form; if not available (3) Salary Statement; if not available (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 (5) Income Certificate certified by the employer (See Sample I), etc.
Self-employed driver or person running business (including sole proprietorship business / partnership business / limited company)	(1) Profit and Loss Account verified by a Certified Public Accountant; if not available (2) Profit and Loss Account prepared on your own (See Sample II or III) <u>and</u> (3) Personal Assessment Notice (if applicable).
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	(1) Tenancy Agreement ; if not available (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).

Note 1: If necessary, the applicant may still be required to submit the relevant document(s). In case of any disputes, the decision of the SFO will be final.

Note 2: If applicant meets the following requirements, it is not required to submit the supporting document of bank account:

- Applicant has a successful application under the financial assistance scheme of the WFSFAA 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 2025/26 school year (i.e. the above bank account which has been disbursed with grant and / or loan).

Enquiries

10.1 For enquiries relating to the completion and submission of household application form, please call our 24-hour enquiry hotline at 2802 2345.

Sample I: Income Certificate

(For salaried employed person who cannot provide items 1-4 of income proof as listed in Paragraph 9.2 (viii) of the "Notes on How to Complete the Form")

(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 2024 to 31 March 2025 (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 2024 to 31 March 2025 (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 April 2024 to 31 March 2025)	
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 April 2024 to 31 March 2025)	
(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 / general worker / casual worker
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. General 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.)

2024

2025

April :HK \$ _____	September :HK \$ _____	January :HK \$ _____
May :HK \$ _____	October :HK \$ _____	February :HK \$ _____
June :HK \$ _____	November :HK \$ _____	March :HK \$ _____
July :HK \$ _____	December :HK \$ _____	
August :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.**)

Please specify the reason for not being able to provide income proof (for example: no employer as a hawker; the company I / my family member worked for has wound up, etc.) (If applicant is not able to provide a reasonable explanation, his / her application will not be further processed by the SFO.)

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 : _____