

## **For Change of Correspondence Address**

To : Student Finance Office  
Working Family and Student Financial Assistance Agency  
Tsim Sha Tsui P.O. Box No. 96824  
(Fax no. : 3622 3321 / 3622 3322)

### **Household Application for Student Financial Assistance Schemes**

**For 2026/27 School Year**

### **Change of Correspondence Address**

I would like to inform the Student Finance Office that my new corresponding address (\*) will be/has been changed effective from \_\_\_\_\_ (Day/Month/Year) as follows :

|                      |                          |                      |                          |                      |                          |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                        |      |
|----------------------|--------------------------|----------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|------------------------|------|
| <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | Flat                 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Floor                | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Block                  |      |
| <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Name of Building       |      |
| <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Estate / Village       |      |
| <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | No. and Name of Street |      |
| <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | District               |      |
| Please ✓             | <input type="checkbox"/> | HK                   | <input type="checkbox"/> | KLN                  | <input type="checkbox"/> | NT                   |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                        | Area |

Signature of Applicant : \_\_\_\_\_

Name of Applicant : \_\_\_\_\_

Application No. / HK ID No. : \_\_\_\_\_

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

(\*) Please delete inappropriate

## **For Change of Residential Address**

To : Student Finance Office  
Working Family and Student Financial Assistance Agency  
Tsim Sha Tsui P.O. Box No. 96824  
(Fax no. : 3622 3321 / 3622 3322)

### **Household Application for Student Financial Assistance Schemes For 2026/27 School Year Change of Residential Address (Applicable for Student Travel Subsidy Scheme)**

I would like to inform the Student Finance Office (SFO) that my new residential address  
(\*)will be/has been changed effective from \_\_\_\_\_ (Day/Month/Year) as follows :

|                                                                                                   |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                        |
|---------------------------------------------------------------------------------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|------------------------|
| <input type="text"/>                                                                              | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Flat                 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Floor                | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Block                |                        |
| <input type="text"/>                                                                              | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Name of Building       |
| <input type="text"/>                                                                              | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Estate / Village       |
| <input type="text"/>                                                                              | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | No. and Name of Street |
| <input type="text"/>                                                                              | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | District               |
| Please✓ <input type="checkbox"/> HK <input type="checkbox"/> KLN <input type="checkbox"/> NT Area |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                        |

Enclosed please find the following address proof copy showing name of applicant or spouse for reference  
(one type of proof only is required)

- |                                                    |                                                  |                                                             |
|----------------------------------------------------|--------------------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> Lease / Tenancy agreement | <input type="checkbox"/> Mortgage payment record | <input type="checkbox"/> Bank statement                     |
| <input type="checkbox"/> Water bill                | <input type="checkbox"/> Electricity bill        | <input type="checkbox"/> Gas / liquefied petroleum gas bill |
| <input type="checkbox"/> Telephone bill            | <input type="checkbox"/> Mobile phone bill       | <input type="checkbox"/> Others : _____ ( Please specify )  |

I understand that the Student Travel Subsidy will be re-calculated with reference to my old and new address as submitted. If the re-calculated assistance is more than that has been released, the SFO will arrange the balance to me. In case the re-calculated assistance is less than that has been released, I have to refund the overpayment to the SFO.

Signature of Applicant : \_\_\_\_\_  
Name of Applicant : \_\_\_\_\_  
Application No. / HK ID No. : \_\_\_\_\_  
Date : \_\_\_\_\_

(\*) Please delete inappropriate