

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)

2024/25 Household Application for Student Financial Assistance Schemes
Declaration

I enclose the following declaration :

I declare that the above information is true and complete.

Signature of Applicant : _____

Name of Applicant : _____

Application No./HK ID No. : _____

Date : _____