

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 2026/27 application refers to the 2025-26 financial year (1.4.2025 – 31.3.2026).

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.		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.	
1. Name in Chinese	陳大文		
3. Name in English	CHAN TAI MAN		
4. Correspondence Address	FLAT A, 12/F	(Please fill out in English)	
Name of Building	HAPPY HOUSE	Flat	C
Estate / Village	HARMONY ESTATE	Floor	2   2
No. & Name of Street	SHAM SHUI PO	Block	
District	KLN	H   A   P   P   Y           H   O   U   S   E	
Area	1978	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.	
5. Year of Birth	A123456(7)	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.	
6. HKID Card No.		(If HKID Card No. is not available, please provide Other Identity Document No. with copy of relevant proof.)	
		Other Identity Document Type:	
		Other Identity Document No.:	
7. Home Tel No. @	1234 5678	(Please refer to paragraph 1.1 of “Notes on How to Complete and Return Household Application Form”)	
8. HK Mobile Phone No.	1234 5678	(The SFO will send various notifications by means of SMS. Please fill in the phone number that can receive SMS.)	
9. Email Address	chantm@gmail.com		

# <input checked="" type="checkbox"/> A. Married (Please provide spouse’s information in Part II)	<input type="checkbox"/> B. * Divorced / Separated / Widowed / Single / Others (Please specify : _____) (Please provide copies of supporting documents, and spouse’s information need not be provided in Part II)
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Please fill in the marital status during the assessment year. If applicant is “Married”, please put “✓” in the box next to item (A).

If applicant is a single-parent during the assessment year, please follow the example below, put “✓” in the box next to item (B) and delete the inapplicable status.

<input checked="" type="checkbox"/> B. * Divorced / Separated / Widowed / Single / Others (Please specify : _____) (Please provide copies of supporting documents, and spouse’s information need not be provided in Part II)
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11. <input type="checkbox"/> 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.)
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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. The SFO will issue notifications by batches to applicants concerned for accessing and submitting their Pre-filled E-form via “eWFSFAA” from around mid-March 2027.

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

<b>A. Spouse</b> 1. Name in Chinese 2. Name in English 3. Year of Birth 4. HKID Card No.  5. HK Mobile Phone No. @ 1234 5678	黃小芬 WONG SIU FAN 1980	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 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 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.
	(Please refer to paragraph 1.1 of "Notes on How to Complete and Return Household Application Form")		

If applicant wishes to apply for financial assistance for the child in this school year (including KCFRS, Grant-KG, TA, STS, DAEFR / DYJFR and FAEAEC), 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>B. Student-applicants and unmarried children residing with the family</b> (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	陳大明
2. Name in English	CHAN SIU FONG	CHAN TAI MING
3. Date of Birth	1/1/2011	2008
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 2025-26	<input checked="" type="checkbox"/> A. Under education <input type="checkbox"/> B. In employment <input type="checkbox"/> C. Unemployed <input type="checkbox"/> D. Other	<input checked="" type="checkbox"/> A. Under education <input type="checkbox"/> B. In employment <input type="checkbox"/> C. Unemployed <input type="checkbox"/> D. Other
6. Name of School / Institution in 2026/27	NUMBER ONE SECONDARY SCHOOL	Y J
7. Class level in 2026/27	S4	
8. Mode of study	<input checked="" type="checkbox"/> A. Whole-day <input type="checkbox"/> B. Half-day (A.M. session) <input type="checkbox"/> C. Half-day (P.M. session) <input type="checkbox"/> D. Part-time	<input type="checkbox"/> A. Whole-day <input type="checkbox"/> B. Half-day (A.M. session) <input type="checkbox"/> C. Half-day (P.M. session) <input checked="" type="checkbox"/> D. Part-time
9. Apply for schemes	<input checked="" type="checkbox"/> Need <input type="checkbox"/> Do not need <input checked="" type="checkbox"/> Kindergarten & below levels: <input type="checkbox"/> (1) KCFRS + (2) Grant-KG <sup>^</sup> <input type="checkbox"/> (3) TA <input checked="" type="checkbox"/> (4) STS <input type="checkbox"/> (5) DAEFR / DYJFR <input type="checkbox"/> (6) FAEAEC	<input checked="" type="checkbox"/> Need <input type="checkbox"/> Do not need <input checked="" type="checkbox"/> Kindergarten & below levels: <input type="checkbox"/> (1) KCFRS + (2) Grant-KG <sup>^</sup> <input type="checkbox"/> (3) TA <input type="checkbox"/> (4) STS <input checked="" type="checkbox"/> (5) DAEFR / DYJFR <input type="checkbox"/> (6) FAEAEC

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 179] 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 subsidies, assistance or exemption in respect of textbook expenses, Internet access charges at home, student travel expenses, tuition fees, examination fees, etc., or receive free textbooks, free transportation service to and from school, etc. 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 the residential address or 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	/	P	2	/	P	3	/	P	4	/	P	5	/	P	6
(vii) Secondary 1 to 3	S	1	/	S	2	/	S	3									
(viii) Secondary 4 to 6	S	4	/	S	5	/	S	6									
(ix) Diploma of Applied Education / Diploma Yi Jin	Y	J															
(x) Others (e.g. Tertiary Level)	O	L															

- 2.1.6 If applicant wishes to amend the application details after submission of the Household Application 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 application form. Application for additional scheme(s) / amending the scheme(s) to apply for must be duly signed by the applicant with the application number / the HKID card number 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 application form.

## 2.2 Subsidy for Internet Access Charges (SIA)

The applicant does not need to separately apply for SIA, which is granted on a household basis and only applicable to families with children who are full-time students of primary or secondary levels and pass the means test for receiving financial assistance under the SFO. 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 students of primary and secondary levels. 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 on right-hand side.



Do not need

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

## 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.

**Remarks: Applicant or his / her spouse must continue to support their parent(s) in this school year and the form of support should be similar to that in the year of assessment. (If the dependent parent(s) passed away before the applicant submits his / her application, it does not fulfil the requirement of continual support to their**

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 1.4.2025 to 31.3.2026		
		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
(1) Name in Chinese: 陳 大 福	HKID Card No.: E   1   2   3   4   5   6   ( 7 )	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(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   5   4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 2025 to 31 March 2026. **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	
			Salary (\$)	Business profit (\$)				
① Applicant	# <input checked="" type="checkbox"/> Full-time	Unemployed (1.4.2025 – 30.4.2025) Clerk (1.5.2025 – 31.12.2025) Self-employed Driver (1.1.2026 – 28.2.2026) Retired (1.3.2026 – 31.3.2026)	Salary (\$)	8	0	0	0	
	# <input type="checkbox"/> Part-time		Business profit (\$)	4	5	0	0	
② Spouse	# <input type="checkbox"/> Full-time	Housewife (1.4.2025 – 30.9.2025) Part-time Cashier (1.10.2025 – 31.3.2026)	Salary (\$)	3	0	0	0	
	# <input checked="" type="checkbox"/> Part-time		Business profit (\$)					
③ Unmarried child residing with the family (if applicable) Name: CHAN Tai-ming	# <input checked="" type="checkbox"/> Full-time	Waiter (1.4.2025 – 10.6.2025) Unemployed (11.6.2025 – 31.3.2026)	Salary (\$)	3	6	0	0	
	# <input type="checkbox"/> Part-time		Business profit (\$)					
④ Unmarried child residing with the family (if applicable) Name:	# <input type="checkbox"/> Full-time		Salary (\$)					
	# <input type="checkbox"/> Part-time		Business profit (\$)					
⑤ Other income (if applicable)	Contribution from children not residing together, relatives or friends (\$)		Rental income of property, land, carpark, vehicle or vessel (\$)		Interests from investments, fixed deposit (\$)		Alimony (\$)	
	1   2   0   0   0   0		9   6   0   0   0   0		5   0   0   0			
	Pension (excluding lump sum retirement gratuity) (\$)		Widow's & Children's Compensation (\$)		Others (\$)			
<b>Total =</b>			<b>304000</b>					

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> )	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	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		

- 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 (\$)
<b>CHAN Tai-fuk</b>	<b>Suffering from diabetes and requiring regular medical treatment.</b>	<b>1   0   4   0   0  </b>

- 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 2026/27 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](http://www.wfsfaa.gov.hk)) later.



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	<ul 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> </ul>
Self-employed person or person running business (including self-employed driver / sole proprietorship business / partnership business / limited company)	<ul 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> </ul>
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	<ul 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> </ul>

**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 2026/27 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 2025 to 31 March 2026 (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 2025 to 31 March 2026 (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 2025 to 31 March 2026)

**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 2025 to 31 March 2026)

(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.)

**2025**

April :HK \$ \_\_\_\_\_  
 May :HK \$ \_\_\_\_\_  
 June :HK \$ \_\_\_\_\_  
 July :HK \$ \_\_\_\_\_  
 August :HK \$ \_\_\_\_\_

**2026**

September :HK \$ \_\_\_\_\_  
 October :HK \$ \_\_\_\_\_  
 November :HK \$ \_\_\_\_\_  
 December :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.**)

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 : \_\_\_\_\_