



天主教甘霖幼稚園
Kam Lam Catholic Kindergarten
2020-2021 Application Form

No. : _____

S T U D E N T	Name	(Given Name)	(Surname)	Photo	
	Gender		Nationality		
	Date of Birth		Place of Birth		
	Home Address				
	Phone No.	(Home)	Birth Certificate No.		
		(Mobile)	Religion		
	If the applicant is a Catholic, please fill in the following details :				
	Parish		Baptismal certificate No.		

P A R E N T S	Father's Name			
	Phone No.		Religion	
	Mother's Name			
	Phone No.		Religion	
	Guardian's Name			
	Phone No.		Religion	

Class Applied	*Please "✓" the box you choose. K1 <input type="checkbox"/> K2 <input type="checkbox"/> K3 <input type="checkbox"/>
	*Please use '1', '2' and '3' to indicate your preference in order of priority. A.M <input type="checkbox"/> P.M. <input type="checkbox"/> W.D. <input type="checkbox"/>

Documents Required	<input type="checkbox"/> 1. Completed application form <input type="checkbox"/> 2. Original & copy of the child's Birth Certificate <input type="checkbox"/> 3. Original & copy of the child's Immunization Record <input type="checkbox"/> 4. 3 self-addressed \$2 stamped envelopes & 1 self-addressed \$7.3 stamped A4 size envelopes <input type="checkbox"/> 5. Two passport sized photos <input type="checkbox"/> 6. Application processing fee of \$40
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Signature Parent/Guardian : _____

Date of Application : _____

FOR OFFICIAL USE ONLY

Received Date: _____

Interview Date: _____