



# 蘇浙幼兒園

*Kiangsu & Chekiang Nursery*

2024/2025 年度學前兩歲班 N1

## 申請須知

(請家長保留此頁)

1. 家長擬為子女報讀本校幼兒園學前兩歲班，請於 2023 年 9 月 1 日(星期五)起在本校網頁下載報名表或到事務處索取。  
地址：香港 北角 清華街三十號  
電話：2578 0402  
網址：www.kcs.edu.hk
2. 報名時間：星期一至五 ~ 上午 9:00 至下午 4:00  
星期六 ~ 上午 9:00 至中午 12:00  
家長填妥報名表格後，請帶備所需文件(詳見下列第 6 項)，親臨本校辦理報名手續。倘資料不詳、文件不齊，申請將不獲處理。  
不接受郵寄申請。
3. 報名地點：幼兒園辦公室
4. 報名費：港幣 40 元正 (只接受現金，不設找贖。已繳交之報名費恕不退還)
5. 遞交文件：
  - i. 出生紙影印本 (必須帶同出生紙正本作核對)
  - ii. 獲准逗留證明文件正本及副本 (如適用)
  - iii. 1.5 吋 x 2 吋正面半身近照兩張 (一張貼在報名表，另一張背面請寫上姓名)
  - iv. 已填妥地址並貼上郵票的回郵信封五個 (4 吋 x 9 吋：\$2.2 郵票信封四個；7 吋 x 10 吋：\$5.4 郵票信封一個)無論申請成功與否，所有已繳交文件一概不予退還。
6. 本校提供校車服務接送學生往返校園和港島各區。有關校車事宜，請直接向事務處查詢，電話：2570 4108。
7. 獲面試之兒童將於 2023 年 11 月上旬收到新生約見証。面試擬於 2023 年 11 月中下旬進行。
8. 2022 年 9 月 1 日之後出生的兒童，須待 9 月開學後足兩歲，學校視乎當時的學位情況，再作出安排。
9. 如有查詢，可致電本園辦公室：2578 0402。如遇惡劣天氣，請留意網上通知。



蘇浙幼兒園

*Kiangsu & Chekiang Nursery*

2024/2025 Nursery Class (N1)

Notes for Enrolment

(Please keep this notice)

1. The application form for N1 enrolment may be downloaded from our school website or collected from our General Office starting on Friday, 1<sup>st</sup> September 2023.

Address : 30 Ching Wah Street, North Point, Hong Kong

Tel : 2578 0402

Website : [www.kcs.edu.hk](http://www.kcs.edu.hk)

2. Application Time : Monday to Friday ~ 9:00am - 4:00pm  
Saturday ~ 9:00am - 12:00pm

Please submit the application form in person together with the documents mentioned in Item 6 below. The application will not be processed if the information or documents provided are incomplete.  
Applications by post are not accepted.

3. Application Venue : Nursery Office

4. Application Fee : HK\$40 (Cash only. No change available and non-refundable)

5. Documents to be submitted :

- i. Copy of Birth Certificate

*Original Birth Certificate must be presented for document verification*

- ii. Copy of Passport / Visa (if applicable)

*Original Passport/ Visa must be presented for document verification*

- iii. 2 current photographs of 1.5" x 2" (Please affix one on the application form and write the applicant's name at the back of the other photograph)

- iv. 5 self-addressed stamped envelopes, including 4 envelopes of 4" x 9" with \$2.2 postage and 1 envelope of 7" x 10" with \$5.4 postage)

Regardless of whether the application is successful or not, all documents submitted will not be returned.

6. Our school bus services will provide transportation for students on Hong Kong Island. Please contact the General Office directly, Tel: 2570 4108 for more information.

7. Children who are accepted for an interview will receive a written notification at the beginning of November 2023. Interviews will be scheduled for mid or late-November 2023.

8. After the commencement of the school term, children who were born on or after 1<sup>st</sup> September 2022 will only be accepted depending on the vacancy when they reach the age of two.

9. Please feel free to call 2578 0402 for any enquiry. In case of bad weather, please pay attention to announcements on the school website.

2024/2025



# 蘇浙幼兒園

## Kiangsu & Chekiang Nursery

### 新生報名表

### APPLICATION FORM

請在方格□劃上「✓」號，選一個或以上皆可

□Please put a "✓" as appropriate. You may tick more than one box.

申請編號 : **N-**  
Application No

投考 Enrolment	學前兩歲 N1	<input type="checkbox"/> 上午班 Morning Class <input type="checkbox"/> 下午班 Afternoon Class	申請日期 Application Date	年 Year	月 Month	日 Day	照片 Photo	
* 恕不接受獲錄取者之轉班申請 Classes cannot be switched after admission			期望入園日期 Expected Date of Entry	年 Year	月 Month	日 Day		
面試語言 First language of child to be used for Interview	<input type="checkbox"/> 普通話 Putonghua <input type="checkbox"/> 英文 English <input type="checkbox"/> 粵語 Cantonese		姓名 Child's Name	中文 Chinese				英文 English
性別 Sex			出生日期 Date of Birth	年 Year	月 Month	日 Day		
出生地點 Place of Birth			國籍 Nationality	國 Country	省 Province	市 City		
出生紙號碼 Birth Cert. No.			住宅電話 Home Phone	電子郵箱 E-mail				
住址 Address								
父親 Father	姓名 Name	國籍 Nationality		教育程度：中學/學士/碩士/博士/其他 Education: Secondary/Bachelor/Master/Doctor/Others				
	語言 Language(s)	1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup>	手提電話 Mobile Phone	職業 Occupation	職位 Position			
	服務處名稱 Name of Employer			服務處電話 Tel. of Employer				
	服務處地址 Business Address							
母親 Mother	姓名 Name	國籍 Nationality		教育程度：中學/學士/碩士/博士/其他 Education: Secondary/Bachelor/Master/Doctor/Others				
	語言 Language(s)	1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup>	手提電話 Mobile Phone	職業 Occupation	職位 Position			
	服務處名稱 Name of Employer			服務處電話 Tel. of Employer				
	服務處地址 Business Address							
合法 監護人 (如適用) Legal Guardian (if applicable)	姓名 Name	關係 Relationship		教育程度：中學/學士/碩士/博士/其他 Education: Secondary/Bachelor/Master/Doctor/Others				
	語言 Language(s)	1 <sup>st</sup> 2 <sup>nd</sup>	手提電話 Mobile Phone	職業 Occupation	職位 Position			
	服務處名稱 Name of Employer			服務處電話 Tel. of Employer				
	服務處地址 Business Address							

正在/曾在本校就讀或畢業之親屬

Relatives who are presently studying in or who have graduated from our school

姓名 Names	關係 Relationship	現時就讀之班別 Presently Studying in	之前就讀/畢業之班別和年份 Graduated from
		<input type="checkbox"/> 幼兒園 Nursery Section 班別 Class _____	<input type="checkbox"/> 幼兒園 Nursery Section 班別 Class _____ Year ____ / ____ 年度
		<input type="checkbox"/> 幼稚園 Kindergarten Section 班別 Class _____	<input type="checkbox"/> 幼稚園 Kindergarten Section 班別 Class _____ Year _____ 至 _____ 學年
		<input type="checkbox"/> 小學 Primary Section 班別 Class _____	<input type="checkbox"/> 小學 Primary Section 班別 Class _____ Year _____ 至 _____ 學年
		<input type="checkbox"/> 國際部 International Section 班別 Class _____	<input type="checkbox"/> 國際部 International Section 班別 Class _____ Year _____ 至 _____ 學年
		<input type="checkbox"/> 公學 College 班別 Class _____	<input type="checkbox"/> 公學 College 班別 Class _____ Year _____ 至 _____ 學年

兒童健康資料  
Child Health Information

本校為使 貴子弟將來能獲得適當的照顧，希望能全面了解兒童健康情況，請家長填妥下列資料，在適當的方格內劃上「✓」。如有隱瞞，家長須付上全部責任。

Please give us any information relevant to your child's health. Non-disclosure may lead to your child being in contact with materials or food which they are allergic to. Parents will wholly bear this responsibility.

1. 曾患何疾病 Medical History:

無 Nil       有。請列出 Yes. Please specify: \_\_\_\_\_

備註(例如：病徵、施救方法) Remarks (e.g. Symptoms, medical treatments):

\_\_\_\_\_

現況 Current Condition:

\_\_\_\_\_

2. 免疫接種 Immunisations:

無 Nil       有 Yes

包括流感疫苗接種 Including influenza vaccine:

無 Nil       有 Yes

3. 敏感食物 Food Allergies:

無 Nil       有。請列出 Yes. Please specify: \_\_\_\_\_

敏感物品 Allergy to items such as soft stuffed toys:

無 Nil       有。請列出 Yes. Please specify: \_\_\_\_\_

請一併填寫以下資料

我們選擇報讀 貴校原因如下：

(請在適當的方格內劃上「✓」，可作多項選擇)

We have enrolled our child with Kiangsu & Chekiang Nursery because:

(Please put a 'tick' as appropriate. You may tick more than one box.)

- |   |   |
|---|---|
| <input type="checkbox"/> 校園環境 of the school campus  | <input type="checkbox"/> 家長朋友介紹 of word-of-mouth  |
| <input type="checkbox"/> 學校鄰近家居 the school is near our home   | <input type="checkbox"/> 學校簡介 of the school brochure  |
| <input type="checkbox"/> 教師質素<br>of the teachers' qualifications  | <input type="checkbox"/> 幼兒園兩歲班(N1)學習內容及課程編排<br>of the curriculum                               |
| <input type="checkbox"/> 普通話教學<br>of the medium of instruction: Putonghua   | <input type="checkbox"/> 下午班特別活動<br>of the special activities for afternoon classes             |
| <input type="checkbox"/> 網上信息，例如有關幼兒園課程活動詳情<br>of the website information, e.g. class<br>activities, functions and events | <input type="checkbox"/> 中英並重<br>the school lays as much emphasis on English<br>as on Putonghua |

其他 Others, please specify: \_\_\_\_\_

備註 Remarks: (例如因宗教/素食習慣而有特別習俗、要求、期望等 For example, any customs and habits  
that require special attention, etc)

藉本申請表格提供的個人資料，乃為處理及審核閣下子女入學申請之用。有關資料只會因應與處理及審核閣下子女入學申請有關的用途或在法律允許的情況下供本校的職員加以使用、披露或轉移。如閣下未能提供本申請表格索取的資料可能導致本校未能處理閣下子女入學申請。若閣下子女入學申請成功獲本校接納，本校將把有關資料存檔作學生記錄並因應與處理學生事務有關的用途或在法律允許的情況下供本校的職員或服務供應商/代理人/承包商加以使用、披露或轉移。閣下有權要求查閱及更改閣下向本校提供並由本校持有的個人資料。閣下須以書面向本校秘書(地址:香港北角清華街 30 號或電郵:enquiry@kcs.edu.hk)提出上述要求。

The personal data to be supplied to this application form is for the purpose of processing your application for admission and will be used by, disclosed to or transferred among our employees only for purposes related to the process of your application for admission or where permitted by law. Failure to provide information requested under this application form may result in us being unable to process your application for admission. Should your application for admission be successful, the personal data may be retained as part of the student's records maintained by us and may be used by, disclosed to or transferred among our employees or agents/contractors/service providers for the administration of the affairs of the student or where permitted by law. Request access to and correction of the personal data provided by you and held by us may be made in writing to the school secretary at 30 Ching Wah Street, North Point, Hong Kong or emailed to enquiry@kcs.edu.hk.

※ 以上填寫資料必須真確及完整，否則校方有權不接受申請 / 取消學位。

**All the information provided on this Application Form must be true, and the form must be completed fully. If not, the school reserves the right to reject this application & withdraw any offer.**

家長姓名  
Parent's Name : \_\_\_\_\_

與兒童關係  
Relationship to child : \_\_\_\_\_

家長簽署  
Parent's Signature : \_\_\_\_\_

日期  
Date : \_\_\_\_\_