

悅樂園(北區)

ung Wah Group of Hospitals Jolly Playland (North District)

機 密
CONFIDENTIAL

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For Official Use Only				
申請編號:				
Application No.:				

申請表

Application Form for Admission

甲部:	兒童資料
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Part I: Child's Information

中文姓名	'l	性別	□男 M	口女 F	
Name in Chinese		Sex	7,	- / -	
英文姓名	3	年龄			
Name in English	A	Age			
◇預產期 (如適用)	Į.	出生地點			
Expected date of delivery	I	Place of Birth			
(if applicable)					相片
出生日期					Photo
Date of Birth					
#出生證明書號碼	43	家中常用語言			
#Birth Certificate No.		Spoken language			
		at home			
住址					
Home Address					
家長/監護人電話	5	家長/監護人			
Parent/ Guardian's Telephone No.	Ē	電郵地址			
	I	Parent/ Guardian's			
	E	Email Address			

乙部:家長/監護人資料

Part II: Parent/Guardian's Particulars

Tare II. Tarent, Guar		전 상대	L(744 (747) HHHH ()
	父親	母親	監護人(請註明關係:)
	Father	Mother	Guardian(Relationship:)
中文姓名			
Name in Chinese			
英文姓名			
Name in English			
日間聯絡電話			
Contact No.			
+教育程度			
+Education Level:			
*職業			
* Occupation:			
工作地區			
Work District			

備註Remarks +: (P) 小學Primary level

- (S) 中學Secondary level
- (U) 大學 University level
- (O) 其他 Others

*:(H) 主婦 Housewife

- (M) 體力工作Manual work (S) 服務行業Service sector
- (C) 文職Clerical

(P) 專業工作Professional (O) 其他 Others

丙部:現/曾就讀本園的兄弟姊妹資料(如適用)

Part III: Particulars of Siblings attending/having attended this centre (if applicable)

	姓名 Name	與兒童關係 Relationship		
1				
2				

[◇]請附夾證明文件副本。 Please attach a copy of proof document for the expected date of delivery.

[#]如使用出生證明書以外的身份證明文件,請註明。If identity document(s) other than Birth Certificate is used, please specify.

丁部:其他資料(可選擇填寫)

Part IV: Other information (Ontional)

Tartiv. Other information	(Optional)			
家庭狀況:	兄弟數目 Number of Brother(s):兄	名 弟名		
Family status	姊妹數目 Number of Sister(s): 姊	名 妹名		
	其他同住家人 Other family members l	iving together, please specify:		
認識本園途徑 Way of learning about our	□本園網頁 Child care centre website	□ 兄姊就讀本園 Graduated or currently studying attending sibling(s)		
centre	□本園單張/橫額 Leaflet/Banner	□親友推薦 Recommended by relatives/friends		
	□ 其他 Others, please specify:			
申請人園原因: (可選多於一項)	□ 就近居所 Close to residence □ 富經驗的幼兒工作員	□ 欣賞本園培育模式 Appreciate our service approach		
The reason(s)of applying for our centre (can select more	Experienced child care workers	□親友介紹 Introduced by relatives/friends		
than one answer)	□ 園舍環境 Centre environment	□ 信賴營運機構 Trust in the service operator		
	□聲譽良好 Good Reputation	□ 其他 Others, please specify:		
社會需要(如適用)	□ 雙職家庭 Working parents	□ 單親家庭 Single-parent family		
Social Needs(if applicable)	□ 家庭成員的特別情況 Family member with special needs			
	□ 社工推薦 Referred by social worker	□ 其他 Others, please specify:		
借註Pomork:善左海带的口内加	Leve Places tick the appropriate hoves			

備註Remark:請在適當的□內加上✓。Please tick the appropriate boxes.

注意事項:

Points to Note:

- 1. 此表格所提供的個人資料會用作處理本園申請之用,在未獲取錄或主動放棄入園,有關資料將被銷毀。
- 2. 當你提供這些個人資料時,請確保這些資料是準確及完整的。如果你不向本園提供所需的資料或你提供錯誤/不 完整的資料,你的申請將會受到影響。
- 3. 請注意你的個人資料可能會被東華三院交予:
 - 東華三院內的有關人士;
 - 根據法例或在法律容許或授權的情況下,東華三院得按法例的要求及指明的用途和目的提供該等資料予任何有關 政府部門/適當的機構;

東華三院將會在得到你的同意後,才使用你的個人資料作為其他目的。

- 4. 根據個人資料(私隱)條例規定,申請人有權要求查閱、更正及更新其個人資料。如有查詢,請與本園聯絡。
- 1. For applicant who has given up the enrollment or whose application is not accepted, the personal data provided will be disposed.
- 2. When you provide personal data to us, please make sure that the data are accurate and complete. If you fail to provide us with the information required or if the information provided is inaccurate or incomplete, your application will be affected.
- 3. Please also note that your personal data may be made available to:
 - authorized persons in Tung Wah Group of Hospitals;
 - any relevant government departments/appropriate authorities when Tung Wah Group of Hospitals is required to submit the data under the relevant legislation for use or where permitted or authorized by law.

We will obtain your consent before using your personal data for any other purposes.

4. If you wish to require access to and/or correction of your personal data, you may do so under Personal Data (Privacy) Ordinance. If you wish to do so, please contact the our centre.

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日期: Date:			家長/監護人姓名: Name of Parent/Guardian:
			家長/監護人簽署: Signature of Parent/Guardian:

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收表日期:			收	表者:			
Application is received on:			Application is received by:				
聯絡日期:		約見日期			約見者:		
Contact Date:		Date of Appointment:			Interviewer:		
申請結果:	_ 入園	_ 候補		放棄入園	通知結果日期:		
Result of the Interview:	□ Available	Waiting List	Ц	Renunciation	Date of notification:		
入園日期:		入園編號:			離園日期:		
Admission Date		Admission No.			Withdrawal Date:		