Tel: 2577 3489

Fax: 2882 4520

Web: www.sekps.edu.hk

E-mail: webmaster@sekps.edu.hk

29th September 2020 Circular: 5/20-21

To: Parents/Guardians.

Student Activities Support (SAS) Grant 2020-2021

To support students with financial needs to participate in life-wide learning activities organized or recognized by schools, the Education Bureau (EDB) set up the Student Activities Support Fund in early 2020. Beneficiaries of the SAS Grant are primary school students in receipt of either the Comprehensive Social Security Assistance (CSSA) or the School Textbook Assistance Scheme (STAS) full-grant, or meeting the school's established 'financially needy' criteria.

To facilitate our arrangement, please fill in the reply slip and submit a photocopy of the related document to the class teacher latest by 6.10.2020 (Tuesday).

Remarks:

- (1) It is at your discretion whether or not to provide the information to school.
- (2) Our school reserves the right to verify the information provided.
- (3) All information will be kept confidential. It will be erased after the end of the school year.
- (4) Our school will use the Grant as subsidy (all or part of the cost) to aid financially needy students to participate in the life-wide learning activities. Parents who have financial difficulties may apply in writing for subsidy.

For enquiries, please contact Miss KO Oi-Chun at 2577 3489.

Thank you for your attention.

(Ms. YU Hing-yin)

Headmistress



Tel: 2577 3489

Fax: 2882 4520

Web: www.sekps.edu.hk

E-mail: webmaster@sekps.edu.hk

Reply Slip

Circular 5 /2020-2021

Student Activities Support (SAS) Grant 2020-2021 (Please return this reply slip to class teacher latest by 6.10.2020)

	Date:
To: Headmistress,	
I have read School Circular 5 dated 29.9.2020	and fully understand its contents.
*□ I do not wish to apply for the Student Act	ivities Support (SAS) Grant 2020-2021.
My <u>CSSA No.</u> is	mprehensive Social Security Assistance (CSSA).
•	<u>full</u> grant under School Textbook Assistance
Scheme in 2020/2021.	
☐ My family is in financial need. [Please specify :	
· · · · · · · · · · · · · · · · · · ·	
•	
Student's Name:	() Class: P
Parent's/Guardian's Signature:	•
D. J. G. 1' 1 N. ' DI OGK I DEPEND	
Parent's/Guardian's Name in BLOCK LETTERS:	
Contact Telephone Number:	(Emergency)
*Please mark ' $\sqrt{\ }$ ' in the appropriate box.	