



## TUNG WAH GROUP OF HOSPITALS 147<sup>th</sup> ANNIVERSARY SCHOLARSHIP APPLICATION FORM

### **SECTION I** (To be completed by the applicant)

#### (A) PERSONAL INFORMATION

Photograph

1. Full Name in English (in block letters, surname first)  
Mr./Ms. \_\_\_\_\_
2. Name in Chinese (if applicable) \_\_\_\_\_
3. Date of Birth \_\_\_\_ D/ \_\_\_\_ M/ \_\_\_\_ Y/      Place of Birth \_\_\_\_\_
4. Hong Kong Identity Card No. \_\_\_\_\_
5. Residential Address (in block letters)  
\_\_\_\_\_
6. Contact Phone No. \_\_\_\_\_ E-mail \_\_\_\_\_
7. Name of Higher Education Institution \_\_\_\_\_
8. Programme of study \_\_\_\_\_

#### (B) FAMILY INFORMATION

1. Applicant's Parents and Independent Siblings residing with the Family

Name		Age	Relationship with Applicant	Present Occupation
Chinese	English			
			Father	
			Mother	

2. Applicant's Siblings attending Day Schools

Name		Age	Relationship with Applicant	School/Level
Chinese	English			

3. Is any member of your family receiving the Comprehensive Social Security Assistance?

Yes ☐ No ☐ In the course of application ☐

4. Are you receiving full-grant under the Student Financial Assistance Scheme?

Yes ☐ No ☐ In the course of application ☐

(C) EDUCATIONAL QUALIFICATION AND OTHER INFORMATION

1. Attendance at Secondary Schools

School	Month and Year				Level
	From		To		
	M/	Y/	M/	Y/	-
	M/	Y/	M/	Y/	-
	M/	Y/	M/	Y/	-

2. Hong Kong Diploma of Secondary Education (HKDSE) 2017 Results  
(Show the level attained in each subject)

	Chinese Language	English Language	Mathematics	Mathematics extended part (Algebra and Calculus)	Mathematics extended part (Calculus and Statistics)	Liberal Studies	Biology	Business, Accounting and Financial Studies	Chemistry	Chinese History	Chinese Literature	Economics	Geography	History	Information and Communication Technology	Physics					
Level																					

3. Positions of Responsibility held by the Applicant in Extra-curricular Activities in S3-S6

School Year	Club/Society	*Positions of Responsibility
/		
/		
/		

\*Please enter either Chairman, Vice-Chairman or Committee Member

4. Services in S3-S6

(a) Service in School

School Year	**Positions of Responsibility
/	
/	
/	

\*\*Please enter either School Prefect, Class Monitor or other service in school

(b) Community Service

School Year	Organization	Service
/		
/		
/		

(c) Service to Tung Wah Group of Hospitals

School Year	Service
/	
/	
/	

5. Scholarships and Awards obtained in S3-S6

School Year	Name of Scholarship/Award	Amount of Scholarship (HK\$)/Award Obtained
/		
/		
/		

6. Scholarships and Awards obtained AFTER the release of HKDSE 2017 results

Name of Scholarship/Award	Amount (HK\$)	Nature (e.g. one-off, renewable for a period of 4 years, etc.)

(D) FORWARD PLAN

Please write a statement of not more than 400 words explaining why you are interested in your programme of study, describing what you would like to gain from higher education and what you may contribute after completing the programme.

(E) SHARING

Please share your experience in overcoming adversity in not more than 400 words.

(F) DECLARATION

I declare that all information provided by me in this form of application is accurate and complete to the best of my knowledge.

Date : \_\_\_\_\_ Signature of applicant : \_\_\_\_\_

**SECTION II** (To be completed by the Principal)

**(A) PERSONALITY AND GENERAL ABILITIES OF APPLICANT**

From your knowledge of the applicant and, where appropriate, in comparison with his/her peers, please comment on the following by putting a [✓] in the appropriate boxes below, on the scale of 1(excellent), 2(good), 3(average) and 4(below average).

	1 Excellent	2 Good	3 Average	4 Below Average
Conduct				
Sense of Responsibility				
Industry				
Perseverance				
Interpersonal Skills				
Power of Analysis				
Independent Thinking				
Leadership				
Initiative				

**(B) RECOMMENDATION OF PRINCIPAL**

Name of Principal: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of School: \_\_\_\_\_

## **Personal Information Collection Statement**

1. The personal data provided by you will be used by the Tung Wah Group of Hospitals (“TWGHs”) for processing application for the Tung Wah Group of Hospitals 147<sup>th</sup> Anniversary Scholarship. The provision of personal data is voluntary. If you do not provide sufficient information, we may not be able to process your application.
2. The personal data provided will only be disclosed to those parties concerned:
  - (i) for the purpose mentioned in paragraph 1 above; or
  - (ii) where the applicant has given his/her consent to such disclosure; or
  - (iii) where such disclosure is authorized or required by law.
3. Data subjects have the right of access and correction to the personal data in accordance with Sections 18 & 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance (Chapter 486 of the Laws of the Hong Kong Special Administrative Region). Enquiries concerning the personal data collected, including access and the making of correction, should be addressed to the Education Division of TWGHs (Email: [edgo@tungwah.org.hk](mailto:edgo@tungwah.org.hk), Fax: 2548 5706, Post: 5/F, TWGHs Wong Fung Ling Memorial Building, 12 Po Yan Street, Sheung Wan, Hong Kong).