YMCA of Hong Kong Christian College
Fee Remission Scheme 2026/27
港青基信書院
學費減免計劃
Application Form

OFFICE USE ONLY
Application No.:
Received on:

Name of Student(s): 1. _____ Class:_____ Class No.:_____

2. _____ Class:_____ Class No.:_____

3. _____ Class:_____ Class No.:_____

Please follow the instructions in Guidelines on Fee Remission Scheme (Section I) to complete the application form. Please put a "✓" in each appropriate box.

<table>
<tr><th>Category:</th><th>Supporting document(s) needed:</th></tr>
<tr><td>☐ Category 1: SFO</td><td>☐ A copy of each family member's HK identity document living in the same house
☐ A copy of the Eligibility Certificate issued by the Student Financial Office</td></tr>
<tr><td>☐ Category 2: CSSA</td><td>☐ A copy of each family member's HK identity document living in the same house
☐ A copy of the Notification Letter of Comprehensive Social Security Assistance (CSSA) (1st April 2025 – 31st March 2026)</td></tr>
<tr><td>☐ Category 3: Means test

i) For special situations only

ii) All applicants should apply for SFO first</td><td>☐ A copy of each family member's HK identity document living in the same house
☐ All bank account records of applicants and family members (1st April 2025 – 31st March 2026)*
☐ Tenancy Agreement (For families living in public housing)
☐ (If applicable) Copy of supporting documents for separation / divorce or spouse's Death Certificate.
☐ (If applicable) Copy of documentary proof on unavoidable medical expenses (for family members who are chronically ill or permanently incapacitated) for the period from 1st April 2025 to 31st March 2026
☐ Income proof (1st April 2025 – 31st March 2026)
<table>
<tr><td>Salaried employed person</td><td><u>Salaried employed person</u>
1. Tax Demand Note issued by the Inland Revenue Department; if not available
2. Employer's Return of Remuneration and Pension Form; if not available
3. Salary Statement; if not available
4. Bank transaction records showing payment of salary, allowance, etc. (together with the page showing the name of the bank account holder) (Please highlight the entries with colour and remarks. For any entries other than income, please also make necessary remarks next to them, or else the YHKCC may include the amount in calculating family income); if not available
5. Income Certificate certified by the employer (<u>Appendix A</u> of the application form).</td></tr>
<tr><td>Self-employed driver or person running a business (including sole proprietorship business / partnership business / limited company)</td><td>1. Profit and Loss Account verified by a Certified Public Accountant; if not available
2. Profit and Loss Account prepared on your own <u>and</u>
3. Personal Assessment Notice (if applicable).</td></tr>
<tr><td>Salaried employed or a self-employed person who cannot produce any income proofs</td><td>Please follow <u>Appendix B</u> to provide a Self-prepared Income Breakdown detailing the monthly income throughout the year and explaining why income proof cannot be produced. (YHKCC reserves the right to decide whether applications from those applicants who cannot provide justification for not producing income proof would be accepted.)</td></tr>
<tr><td>Landlord with rental income</td><td>1. Tenancy Agreement; if not available
2. Bank transaction record showing rental income (together with the page showing the name of the bank account holder) (Please highlight the entries with colour and remarks. For any entries other than income, please also make necessary remarks next to them, or else YHKCC may include the amount in calculating family income).</td></tr>
</table>
*Applicants may need to submit a bank statement to reflect the change of the financial situation. It is subject to the request by the school.</td></tr>
</table>

All the categories must complete this form

Private & Confidential

YMCA of Hong Kong Christian College
2 Chung Yat Street, Tung Chung, Hong Kong.
Tel: 29888123 Fax: 29882000

Deadline for Application: 14th September, 2026

Part I Particulars of Family Members Living in the Same House

- Please write in **BLOCK LETTERS**. Please provide information on your occupation and relevant income and those of your family member(s) during the period **from 1st April 2025 to 31st March 2026**.
- If you / your family member(s) has retired, was unemployed or was a student or a housewife during the period, please specify the status and relevant duration. An additional sheet may be added if there is insufficient space to provide the information.

	Applicant (Guardian)	Spouse	Family members (Student)	Family members
Name in English (According to HKID Card / Passport)				
Name in Chinese				
HKID Card No.	( )	( )	( )	( )
Date of Birth (dd/mm/yy)				
Relationship	--	* If your spouse is deceased, divorced or separated from you, please tick ✓ this box. ☐		
Address				
Home Telephone No.				
Mobile Phone No.				
Name of Bank and Bank Account No.	1. 2. 3.	1. 2. 3.		
Occupation				
Company Name				

	Applicant (Guardian)	Spouse	Family members (Student)	Family members
Annual Income (1/4/2025-31/3/2026)	$	$	$	$
Other income: Stock dividend, Fixed deposit, Foreign currencies, Rental income, other(s)	$	$	$	$
Sub-total amount :	(a) =	(b) =	(c) =	(d) =

Total amount = (a) + (b) + (c) + (d) =

Part II Other Financial Assistance from Government / Other Organisation in academic year 2026-27

Please indicate if your family will receive any financial assistance from the government / any organization in the **current academic year**.

Type of Assistance	Eligibility	Supporting Document
Financial Assistance Scheme from SFO (such as textbook allowance, travel subsidy, etc.)	***Full / Half grant**	**Yes / No**
Comprehensive Social Security Allowance (CSSA)	**-**	**Yes / No**
Others: (please specify)		**Yes / No**

Part III Medical Expenses Incurred by Family Member(s) with Chronic Illness

(Please provide a copy of the supporting document)

Name	Name of Incapacity of Chronic Illness	Medical expenses incurred within the assessment period ($)

Part IV Other Special Family Information

Please fill in other information that may assist in assessment, such as **special financial hardship / incurred medical expenses for family members who are permanently incapacitated, any member who is not a self-bearing child of yours, etc.** An additional sheet may be added if there is insufficient space to provide the information.

Part V Declaration

I hereby declare that:

(a) The information in this application and the supporting documents provided by my family members and me are true and complete. The dependent parent claimed by me in this application means any of the applicant's parents, including in-laws, who is not a recipient of the Comprehensive Social Security Assistance. They must, throughout the assessment year (1st April 2025 to 31st March 2026), meet any one of the following conditions for a continuous period of not less than 6 months.

(i) has resided / been residing with the applicant's family and supported by the applicant or his/her spouse; or

(ii) has taken up permanent residence at another premises owned or rented by the applicant (i.e. Name of the applicant and / or his/her spouse should be shown on the relevant lease documents); or

(iii) has been living in his/her own premises, rented premises or residing in elderly homes and is totally supported by the applicant.

Remarks: Applicant or his/her spouse should continue to support their parents in the 2026 /27 school year, and the level of support should be similar to that in the year of assessment.

(b) I understand and consent that (i) the YMCA of Hong Kong Christian College (YHKCC) will assess the eligibility and assistance level of my family based on the information provided by me and the total number of applicants in the year; and (ii) every year the YHKCC will select a number of successful applications for counter-checking including home visits. If selected, my family members and I will fully cooperate with the staff of the YHKCC; and (iii) the YHKCC may make adjustments to the assistance level awarded based on the findings of authentication. Any misrepresentation and concealment of facts or intentional obstruction of the YHKCC staff in their course of investigation will lead to disqualification, restitution in full of the assistance granted and possible prosecution; and (iv) all documents related to this application submitted will be kept by the YHKCC for at least seven (7) years.

(c) I give consent to the YHKCC and its delegated bodies to process my application to liaise with related parties to verify and disclose the information provided by me.

(d) I also commit to inform all the family members as listed in the form that their personal data is provided to the YHKCC for the purposes of this application.

(e) I understand that insufficient information / misrepresentation of facts will render an application disqualified for further processing, restitution in full of the assistance granted and possible prosecution.

(f) I commit to inform the YHKCC immediately of any financial assistance obtained from any individual, the government and other organizations for the student in school year 2026/27. Any concealment of facts will lead to disqualification and restitution in full of the subsidy granted.

(g) I understand that the actual subsidy amount is subject to the availability of the School Fee Remission and Scholarship Fund and the number of applications. The calculation will be based on #1 and #2 on P.6 of the《Guidelines on Fee Remission Scheme 2026/27》.

(h) I understand, agree and accept all information, rules and regulations listed in the "Guidelines on Fee Remission Scheme".

The application will not be approved if we do not receive all the supporting documents

Date:_____ Signature of Applicant: _____

Appendix A

Only category 3 may need to complete this form.

YMCA of Hong Kong Christian College
Fee Remission Scheme 2026/27
港青基信書院
學費減免計劃
Income Certificate
收入證明書

(For people who are employed with a salary, but cannot produce salary statements, taxation documents, bank statements showing payment of salary or other income proofs and yet not applicable to sole proprietors or partners of partnership businesses.)
適用於受薪行業而沒法提供糧單、稅單、領取薪金的銀行自動轉帳紀錄或其他收入證明的人士，但不適用於獨資或合資經濟業務人士。

Name of student: _____ Class: _____
學生姓名： 班別：

Note: **The following tables are to be completed by the Employer.** Please provide the total income of the staff during the period from April 2025 to March 2026. Employer's initial is required against any amendment.
注意：**以下各表應由僱主填寫**。請填報該職員由2025年4月至2026年3月期間的總收入。如有塗改，請僱主在旁加簽。

Income of Applicant 申請者的收入

This is to certify that _____, the holder of a Hong Kong I.D. Card No. _____,
茲證明 香港身份證號碼持有人

is employed in this company. His/Her total salary and allowance and other income is HK$
乃本公司職員其薪金、津貼及其他收入的總和為港幣

_____ (i.e. period from____to ____).
即至期間

_____	_____	_____
Company Chop 公司蓋章	Signature of Employer 僱主簽名	Name of Employer 僱主姓名

_____	_____
Contact Telephone No. 聯絡電話	Date 日期

Income of Spouse 配偶的收入

This is to certify that _____, the holder of a Hong Kong I.D. Card No._____,
茲證明 香港身份證號碼持有人

is employed in this company. His/Her total salary and allowance and other income is HK$
乃本公司職員其薪金、津貼及其他收入的總和為港幣

_____ (i.e. period from_____ to _____).
即至期間

_____	_____	_____
Company Chop 公司蓋章	Signature of Employer 僱主簽名	Name of Employer 僱主姓名

_____	_____
Contact Telephone No. 聯絡電話	Date 日期

Income of unmarried child residing with the family 同住未婚子女的收入

This is to certify that _____, the holder of a Hong Kong I. D. Card No. _____,
茲證明 香港身份証號碼持有人

is employed in this company. His/Her total salary and allowance and other income is
乃本公司職員其薪金、津貼及

HK$ _____ (i.e. period from _____ to _____).
其他收入的總和為港幣 即至期間

_____	_____	_____
Company Chop 公司蓋章	Signature of Employer 僱主簽名	Name of Employer 僱主姓名

_____	_____
Contact Telephone No. 聯絡電話	Date 日期

Appendix B

Only category 3 may need to complete this form.

YMCA of Hong Kong Christian College
Fee Remission Scheme 2026/27

Income Statement

(For people who are self-employed / have no fixed income and cannot produce any income proofs.)

Note: Sole proprietor or partner of a partnership business should forward a Profit and Loss Account or taxation documents of the 2025-2026 financial year.

Warning: The personal data given in this statement must be true and complete. Any persons who obtain property/pecuniary advantage by deception are liable to legal action.

1. Particulars of Student

Name of student: _____ Class: _____

Name of student: _____ Class: _____

Name of student: _____ Class: _____

2. Actual Income

Name	Occupation/Others	Period (1st April 2025 to 31st March 2026)		Total Annual Income (HKD)	Payment method (cash / cheque / direct debit)
		From (M/Y)	To (M/Y)		
Name of Applicant:					
			Total:		
Name of Spouse:	1.				
	2.				
	3.				
			Total:		
Name of Unmarried Child residing with the family:	1.				
	2.				
	3.				
			Total:		

3. Reason(s) for the applicant, the spouse and/or unmarried children residing with the family for not being able to produce any income proofs are as follows:

_____

_____

Declaration: I declare that the above information is true and complete.

Date: _____ **Signature of Applicant**: _____