

HKCCCU Logos Academy

School Year 2020-2021

Application Form for Student Financial Assistance Schemes

Cover Sheet for Supporting Documents

Name of Applicant : _____ (Name of Parent / the Guardian)

Name of Student-Applicant(s) :

(1)	Name In Chinese :		Name in English :	
	Student Number :		Class Name and Number :	
(2)	Name In Chinese :		Name in English :	
	Student Number :		Class Name and Number :	
(3)	Name In Chinese :		Name in English :	
	Student Number :		Class Name and Number :	
(4)	Name In Chinese :		Name in English :	
	Student Number :		Class Name and Number :	

Notes on How to Complete the Application Form:

- ※ Please read the Guidance Notes on Application for Student Financial Assistance Schemes before completing the Application Form
- ※ Please fill in the form clearly in black or blue ink.
- ※ Please cut and paste the copies of Hong Kong Smart Identity Card of the applicant and family members (including the dependent parent(s) (if applicable)) claimed in the application form at the back and staple copies of all relevant document proof to this sheet.
- ※ (If the HK Smart ID Card is not available, please attach copies of other valid identity documents.)

WARNING

The personal data (include any documents under oath) in the application will be used to assess an applicant's eligibility for financial assistance and the level of assistance. It is an offence to obtain property/pecuniary advantage by deception. Any person who does so commits an offence and is liable, on conviction, to imprisonment for a maximum of 10 years under the Theft Ordinance, Chapter 210.0

Copies of HK Smart ID Card

Please cut and paste the copy of the HK Smart ID Card as appropriate.

(If the HK Smart ID Card is not available, please attach copies of other valid identity documents, e.g. Hong Kong Birth Certificate, Hong Kong Re-entry Permit, Document of Identity for Visa Purposes, One-way Permit, etc.)

Copy of the HK Smart ID Card of the applicant	Copy of HK Smart ID Card of the spouse
Applicant	Spouse
Copy of the HK Smart ID Card of family member (including the dependent parent (if applicable))	Copy of the HK Smart ID Card of family member (including the dependent parent (if applicable))
Family Member	Family Member
Copy of the HK Smart ID Card of family member (including the dependent parent (if applicable))	Copy of the HK Smart ID Card of family member (including the dependent parent (if applicable))
Family Member	Family Member
Copy of the HK Smart ID Card of family member (including the dependent parent (if applicable))	Copy of the HK Smart ID Card of family member (including the dependent parent (if applicable))
Family Member	Family Member

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Application Form for Student Financial Assistance Schemes

Part I - Particulars of the Applicant

(The Applicant must be the parent or guardian (as recognised under Guardianship of Minors Ordinance, Cap 13) of the student-applicant(s).)

1.	Name in Chinese	_____	Title@# <input type="checkbox"/> A	Mr. <input type="checkbox"/> B	Ms. <input type="checkbox"/> C	Miss
2.	Name in English	_____				
3.	Correspondence Address (Please fill out in English)	Flat _____	Floor _____	Block _____		
	Name of Building	_____				
	Estate / Village	_____				
	No. & Name of Street	_____				
	District	_____				
	Area	# <input type="checkbox"/> 1 HK	<input type="checkbox"/> 2 KLN	<input type="checkbox"/> 3 NT	<input type="checkbox"/> 4 OHK	
4.	Identity Document	Identity Document Type :	_____			
		Identity Document No. :	_____			
5.	HK Mobile Phone No.	_____				
6.	Home Tel No. @	_____				
7.	E-mail address	_____				
8.	Your marital status during the period from 1.4.2019 to 31.3.2020					
	# <input type="checkbox"/> A Married	<input type="checkbox"/> B	*Divorced / Separated / Widowed / Single etc.			
	(Please provide spouse's information in Part III)	(Please provide copies of supporting documents, and spouse's information need not be provided in Part III, If applicants are unable to provide the supporting documents, please explain in writing the reasons and sign on an explanatory note)				

(# please circle the appropriate box(es) / item(s). * delete the inappropriate item(s). @ are optional items.)

Part II - Applicant's Supplementary Information

1	If you have filled in Part III particulars of any student-applicant or/and member who is <u>not</u> a self-bearing child of yours, please specify his/her name, explain in detail with proof why the application is not submitted by the parent of the student or/and state the reasons for declaring him/her as a family member.

2	If a family encounters a sudden financial hardship, please state details of the situation, relevant duration and submit supporting documents.

Part III - Particulars of Family Members

A. Spouse – (Marital status is : Divorced/ Separated/ Widowed/ Single etc., need not be filled in)	
1. Name in Chinese	_____
2. Name in English	_____
3. Identity Document: Identity Document Type :	_____
Identity Document No. :	_____
4. HK Mobile Phone No. @	_____

B. Student and unmarried children residing with the family (If there are more than 4 student and unmarried children residing with the family, please fill in the additional information at the bottom) (Unmarried children in receipt of CSSA will not be counted as ‘family members’ under the Adjusted Family Income (AFI) mechanism, so need not be filled in.)	
1. Name in Chinese	_____
Name in English	_____
Identity Document: Identity Document Type :	_____
Identity Document No. :	_____
Status for the period 1.4.2019 to 31.3.2020	# <input type="checkbox"/> Under Education <input type="checkbox"/> In employment <input type="checkbox"/> Unemployed/Other
2. Name in Chinese	_____
Name in English	_____
Identity Document: Identity Document Type :	_____
Identity Document No. :	_____
Status for the period 1.4.2019 to 31.3.2020	# <input type="checkbox"/> Under Education <input type="checkbox"/> In employment <input type="checkbox"/> Unemployed/Other
3. Name in Chinese	_____
Name in English	_____
Identity Document: Identity Document Type :	_____
Identity Document No. :	_____
Status for the period 1.4.2019 to 31.3.2020	# <input type="checkbox"/> Under Education <input type="checkbox"/> In employment <input type="checkbox"/> Unemployed/Other
4. Name in Chinese	_____
Name in English	_____
Identity Document: Identity Document Type :	_____
Identity Document No. :	_____
Status for the period 1.4.2019 to 31.3.2020	# <input type="checkbox"/> Under Education <input type="checkbox"/> In employment <input type="checkbox"/> Unemployed/Other

(# please circle the appropriate box(es) / item(s) , @ are optional items.)

Additional information - (if there are more than 4 student and unmarried children residing with the family, please continue to fill in here):

C. Dependent Parent

(Dependent Parents in receipt of CSSA will not be counted as 'family members' under the Adjusted Family Income (AFI) mechanism, so need not be filled in)

(Please refer to Paragraph 3.6 of " School Year 2020-2021 Guidance Notes on Application for Student Financial Assistance Schemes " for definition of "Dependent Parent". Please also provide supporting documents for dependence of the parents including tenancy agreement, residential address proof, receipt of the home for the elderly or the oath, etc.)

If the details of Dependent Parents are not identical to those in the Tax Return, the applicant should make an oath in any District Office to declare that all the information put down in the application form is true. The oath for each dependent parent could include :

- 1 I/My spouse declare that my _____ (relation e.g. father and/or mother) ID number _____(e.g.A123456(7)) not in receipt of CSSA and not in employment and resided with me/my spouse, without paying full cost for at least 6 months during the period from 1 April 2019 to 31 March 2020; or
- 2 I/My spouse declare that my _____ (relation e.g. father and/or mother) ID number _____(e.g.A123456(7)) not in receipt of CSSA and not in employment and resided in premises owned or rented by the me/my spouse for at least 6 months during the period from 1 April 2019 to 31 March 2020; or
- 3 I/My spouse declare that my _____ (relation e.g. father and/or mother) ID number _____(e.g.A123456(7)) not in receipt of CSSA and not in employment and resided in an elderly home and the expenses were fully paid by me/my spouse for at least 6 months during the period from 1 April 2019 to 31 March 2020; or
- 4 I/My spouse declare that my _____ (relation e.g. father and/or mother) ID number _____(e.g.A123456(7)) not in receipt of CSSA and not in employment and the cost of living was/were totally supported by me/my spouse for at least 6 months during the period from 1 April 2019 to 31 March 2020.

	Name of Dependent Parent	Identity Document (please provide copy)	Dependency Status (Please put "✓" in the appropriate box)		
			at least 6 months during 1 April 2019 to 31 March 2020		
			Resided with the applicant's family	Resided in premises owned or rented by the applicant or his/her spouse	Resided in an elderly home and the expenses were fully paid by the applicant or his/her spouse OR totally supported by the applicant or his/her spouse
1	Name in Chinese:	Identity Document Type:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Name in English:	Identity Document No.:			
	Is the dependent parent recipient of the Comprehensive Social Security Assistance (CSSA)?	<input type="checkbox"/> Y 或 <input type="checkbox"/> N			
2	Name in Chinese:	Identity Document Type:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Name in English:	Identity Document No.:			
	Is the dependent parent recipient of the Comprehensive Social Security Assistance (CSSA)?	<input type="checkbox"/> Y 或 <input type="checkbox"/> N			

3	Name in Chinese:	Identity Document Type:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Name in English:	Identity Document No.:			
	Is the dependent parent recipient of the Comprehensive Social Security Assistance (CSSA)?	<input type="checkbox"/> Y 或 <input type="checkbox"/> N			
4	Name in Chinese:	Identity Document Type:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Name in English:	Identity Document No.:			
	Is the dependent parent recipient of the Comprehensive Social Security Assistance (CSSA)?	<input type="checkbox"/> Y 或 <input type="checkbox"/> N			

Number of Family member (inclusive the applicant) : _____

Part IV - Family Income and Expenses

Please provide information on your position and relevant actual income (including part-time income and no need to fill in decimal places) and those of your family member(s) during the period from **1 April 2019 to 31 March 2020** (please refer to Paragraph 6 of " School Year 2020-2021 Guidance Notes on Application for Student Financial Assistance Schemes "). If you / your family member(s) was a housewife, was unemployed or has retired during the period, please specify the status and he/she should make an oath in any District Office to declare that all the information put down in the application form is true and attach this oath in the application form. The oath could include "I declare that I am unemployed and received no income from ____ month ____ year until ____ month ____ year" or "I declare that I am unemployed and received no income since ____ month ____ year", etc. For self-employed persons, please provide the relevant income proof (e.g. receipt for services rendered, profit and loss account (please refer to Sample II at Annex of " School Year 2020-2021 Guidance Notes on Application for Student Financial Assistance Schemes " or Personal Assessment Notice issued by the Inland Revenue Department). Additional sheet may be added if there is insufficient space to provide the information.

Applicant and Family Member		Total Annual Income (\$)				For Office Use
		(Including salary / wage / bonus / allowance / part-time income (excluding Mandatory Provident Fund (MPF) / Provident Fund contribution by employee))				
		Name	Salary (\$)	Business profit (\$)		
1	Applicant					
2	Spouse					
3	Unmarried child residing with the family (if applicable)					
4	Applicant					
5	Other income (if applicable)	Contribution from children not residing together, relatives or friends	Rental income of property, land, carpark, vehicle or vessel	Interest from investments, fixed deposit	Alimony	
		Pension (excluding lump sum retirement gratuity)	Widow's & Children's Compensation	Others		
6	Less: Medical Expenses Incurred by Family Member(s) with Chronic Illness (Guide for filling method, please refer to Paragraph 4 of " School Year 2020-2021 Guidance Notes on Application for Student Financial Assistance Schemes " (please provide a copy of supporting document) (The ceiling of deductible amount for each family member is \$21,780 per year in 2020/21)					
	Name	Nature of incapacity or Chronic illness		Medical expenses incurred within the assessment period (\$)		
	1					
	2					
	3					
	4					
	Total Net Family Income from 1 April 2019 to 31 March 2020 :		=====			

Note :

“Members of Family” refers to the applicant’s spouse, unmarried child/children residing with the family and the dependent parent(s) who are supported by the applicant and/or his/her spouse.
Types of incomes earned by the family both within and outside Hong Kong that should be reported are listed below for reference.

Items need to be reported	Items need not to be reported
1 Salary (including the salary of applicant, applicant’s spouse and student-applicant’s unmarried sibling(s) residing with the applicant for full-time, part-time or temporary jobs, <u>excluding Mandatory Provident Fund (MPF) / Provident Fund contribution by employee</u>)	1 Old age allowance / Old age living allowance
2 Double pay / Leave pay	2 Disability allowance
3 Allowance (including overtime work / living / housing or rent / transport / meals / education / shift allowance, etc.)	3 Long service pay / Contract gratuity
4 Bonus / Commission / Tips	4 Severance pay
5 Studentship	5 Loans
6 Wages in lieu of notice of dismissal	6 Lump sum retirement gratuity / Provident fund
7 Business profits and other income earned by means of self-employment, such as hawking, driving taxis / minibuses / lorries, and fees for services rendered, etc.	7 Inheritance
8 Alimony	8 Charity donations
9 Contribution from any person(s) not residing with applicant’s family to any of the applicant’s family member(s) (including money or contribution of housing / remittance(s) / contribution for mortgage repayment / rent / water / electricity / gas or other living expenses)	9 Comprehensive Social Security Assistance
10 Interests from fixed deposits, stocks, shares and bonds, etc.	10 Retraining allowance / Work Incentive Transport Subsidy / Working Family Allowance
11 Rental income of property, land, carpark, vehicle or vessel (including Hong Kong, the Mainland and overseas)	11 Insurance / accident / injury indemnity
12 Monthly pension / Widow’s & Children’s Compensation	12 MPF / Provident Fund contribution by employee

Part V - Declaration

- I)** I/We have read the " School Year 2020-2021 Guidance Notes on Application for Student Financial Assistance Schemes " (GN). I/We fully understand and agree to the arrangements stated therein in relation to my/our application. I/We undertake and warrant that I/we shall comply with all provisions in the GN & Notes and such other requirements and directions as specified from time to time by the Hong Kong Special Administrative Region (HKSAR) Government. I/We hereby declare that:
- (a) The information in this application form and the supporting documents provided by me/us are true, complete and accurate. I/We understand and consent that (i) the HKCCCU Logos Academy (the School) will assess the eligibility and assistance level of my family based on the information provided by me/us; and (ii) the School is authorized to conduct authentication of my/our application (including but not limited to home visits and other checking) to verify whether the information provided therein is true, complete and accurate. I and my family members will fully cooperate with staff of the School; and (iii) the School may make adjustment to the assistance level / amount of financial assistance granted based on the findings of authentication. Any misrepresentation, concealment of facts, provision of misleading or false information or intentional obstruction of the School staff in their course of authentication will lead to disqualification of issued notification letter, restitution in full of the assistance granted and possible prosecution. I/We commit to refund the School any overpayment of financial assistance granted (including financial assistance provided under all financial assistance schemes administered by the School) immediately upon request.
 - (b) I/We give consent to the School and its authorized bodies to process my/our application and use the personal data provided to the School in connection with this application form in accordance with Paragraph 5 of the GN and to liaise with related parties to verify and disclose the information provided by me/us.
 - (c) I am/We are authorized by all the family members listed in this application form to give consent and hereby give consent on their behalf to the School and its authorized bodies to access such family members' personal data in accordance with Paragraph 5 of the GN and to liaise with related parties to verify and disclose the information provided to the School.
- II)** This Declaration shall be governed by and constructed in accordance with the laws of the HKSAR. I/We have read the provisions of this declaration carefully and fully understood my/our obligations and liabilities under this declaration, and agree to the arrangements stated therein including but not limited to:
- () Fee Remission when granted will only start on or after the month of the submission of this form in this academic year.
 - () If an applicant is not able to provide all the required documents or detailed information for the application, the school has the right to require the applicant to provide all necessary documents or information. If the applicant is not able to provide the required supplementary information within one month after receiving the oral or written notice from the school, the application will be terminated automatically without further notice. However, if the applicant wants to continue to apply for the fee remission, he/she should re-submit a new application form with all sufficient documents enclosed. If this application is eligible for a fee remission, the fee remission will only start from the month in which the application form with sufficient documents is re-submitted.

(Please complete the above two brackets with "✓")

Signature of Applicant :	_____	Signature of Spouse of Applicant :	_____
Identity Document No. :	_____	Identity Document No. :	_____
Date :	_____	Date :	_____

Determination of eligibility and the Level of Fee Assistance

The basic calculation of the (AFI) are as follows:

$$\text{AFI} = \text{Gross annual income of the family} \div (\text{Number of family member (Remark 1)} + 1^{**})$$

* For the annual income of unmarried child/children residing with the family, 30% of the income is used.

** For single-parent families of 2 to 3 members, the '+ 1 factor' in the formula will become +2.

Details can be referred to the School Year 2020-2021 Guidance Notes on Application for Student Financial Assistance Schemes via http://www.logosacademy.edu.hk/forms-download/#fee_remission_scheme.

The AFI eligibility benchmarks for various levels of assistance are listed in the table below :

AFI Groups between (HK\$)	Level of Fee Assistance
\$0 - \$53,000	Full
> \$53,000 - \$86,000	Half
> \$86,000	Ineligible

Example 1: A family of 4 members includes the applicant, his/her spouse, unmarried child/children residing with the family and a daughter studying in secondary school.

- Annual income of the applicant \$ 140,000
- Annual income of his/her spouse's \$ 98,000
- Annual income of unmarried child/children residing with the family \$ 70,000
- Other income (Remark 2) \$ 10,000
- Medical Expenses* incurred by family member (1 member claimed) \$21,000

***(The ceiling of deductible amount for each family member is \$21,780 per year in 2020/21)**

$$\text{AFI} = (\$ 140,000 + \$ 98,000 + \$ 70,000 \times 30\% + \$ 10,000 - \$ 21,000) \div (4 + 1) = \$ 49,600.$$

	Example 1	Example 2	Example 3	Example 4
Annual income of the applicant	\$140,000	\$280,000	\$160,000	\$360,000
Annual income of his/her spouse's	\$98,000	\$ 0	\$100,000	\$120,000
Annual income of unmarried children	\$70,000 (× 30%)	\$ 0	\$ 0	\$ 0
Other income (Remark 2)	\$10,000	\$ 0	\$ 0	\$ 0
Medical Expenses	\$21,000 (1 member)	\$24,000 (1 member)	\$60,000 (1 claimed \$21,000, 1 claimed \$39,000)	\$100,000 (1 claimed \$48,000, 1 claimed \$52,000)
Number of family members	4 members	3 members (single-parent family)	3 members	4 members
AFI	\$49,600	\$51,644	\$54,305	\$87,288
Level of Fee Assistance	Full	Full	Half	Ineligible

Remark 1: The member of a family normally refer to the applicant, his/her spouse, unmarried child/children residing with the family and the dependent parent(s) who are supported by the applicant and/or his/her spouse.

Remark 2: Include: Contribution from children not residing together (including money or contribution of housing / water / electricity / gas or other living expenses), relatives or friends, Rental income of property, land, carpark, vehicle or vessel, Interest from investments, fixed deposit, Alimony, Pension (excluding lump sum retirement gratuity), Widow's & Children's Compensation and others.