



Notice : 6/2024-25

17.9.2024

To: Parents / Guardians,

**Survey on receiving Comprehensive Social Security Assistance (CSSA) or full grant under the Student Financial Assistance Schemes (SFAS)**

In order to provide more assistance and opportunity to target students to improve their learning effectiveness, broaden their learning experiences outside the classroom and raise their understanding of the community and sense of belonging, the government is going to provide funding to launch programmes that facilitate these purposes. The target students are those in receipt of the **Comprehensive Social Security Assistance (CSSA) or full grant under the Student Financial Assistance Schemes (SFAS)**. For the school to plan activities well and fully utilize the funding for target students, parents are invited to indicate on the reply slip the information for receiving the CSSA or full grant in this academic year. *Information provided will only be used for school's planning and verification in relation to the application of various activities supported by the funding.* Parents are requested to return the reply slip to the class teacher on or before 20.9.2024 (Friday).

(Ms CHUI Sau-man)

Headmistress



**Reply Slip**

**Survey on receiving Comprehensive Social Security Assistance (CSSA) or full grant under the Student Financial Assistance Schemes (SFAS)**

Notice: 6/2024-25

Date: \_\_\_\_\_

To : Headmistress,

I have read the School Notice No.6/2024-25 dated 17.9.2024 and I fully understand its content.

- |      |                          |  |
|------|--------------------------|--|
| I am | <input type="checkbox"/> | a recipient of the <b>Comprehensive Social Security Assistance (CSSA)</b> from the Social Welfare Department. (CSSA Ref. No. : _____)          |
|      | <input type="checkbox"/> | a recipient of the <b>Full Grant</b> School Textbook Assistance.   |
|      | <input type="checkbox"/> | a recipient of the <b>Half Grant</b> School Textbook Assistance.   |
|      | <input type="checkbox"/> | <b>NOT</b> a recipient of the Comprehensive Social Security Assistance (CSSA) from the Social Welfare Department or School Textbook Assistance |

**ONE "✓" only**

*Please put a "✓" in the appropriate box and fill in CSSA reference number if necessary.*

Student's Name: \_\_\_\_\_ ( ) Class: P. \_\_\_\_\_

Parent's / Guardian's Signature: \_\_\_\_\_