



中華基督教青年會中學
Chinese Y.M.C.A. Secondary School

Application for Fee Subsidy

For Office Use

Part I: Student Particulars

Name in Chinese	Name in English	Class	Number

Part II: Applicant Particulars (Parents / Guardian)

Name in Chinese	Name in English	Relationship with the Student
Telephone Number		Email
Home	Mobile	

Part III: Information on All Family Members¹

Single Parent² ☐ Yes ☐ No

Name	HK ID ³	Relationship with the Applicant	Mode of Employment (Full-time / Part-time)	Current Status Student / housewife / Employment / unemployed / retired ⁴ (Please specify the period if it is not a whole year)
		Applicant		

1. Family members are defined as parents, unmarried siblings and grandparents of the student.
2. Please put a “√” in the appropriate box.
3. Copies of Identity Card are required (Please cut and paste the copy of the HK Smart ID card on Appendix 1).
4. Family members who are unemployed/retired, please provide copies of relevant supporting documents or attach a declaration letter (please use Attachment 4).

Part IV: Family Income (Twelve months period preceding the month of your application)

(Documentary evidences required, please fill in either Appendix 3a, 3b or 3c)

	Item	Amount (HK\$)
1.	Total annual income of the applicant	
2.	Total annual income of applicant's spouse	
3.	30% of total annual income of unmarried children residing with the family	
4.	Other income (Please provide a copy of supporting document) e.g.: a. Contribution from children not residing together, relatives or friends b. Rental income of property, land, carpark, vehicle or vessel c. Interests from investments, fixed deposit d. Alimony e. Pension (excluding lump sum retirement gratuity) f. Widow's & Children's Compensation	
Gross Total Annual Income:1+2+3+4		

Please put a "√" in the appropriate box.

Are you currently receiving Comprehensive Social Security Assistance Scheme? ☐ Yes ☐ No

(You can provide additional information and/or special circumstances on separate sheets if necessary.)

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

Part IV Medical Expenses Incurred by Family
(Please provide a copy of supporting document)

Name	Nature of incapacity or Chronic illness	Medical expenses incurred within the assessment period (\$)

If applicant has incurred medical expenses for family members (for family members who are chronically ill or permanently incapacitated) during Twelve months period preceding the month of your application, he / she may state details of the situation in Part V of the application form. Applicant must provide relevant medical certificate(s) and receipt(s) issued by the hospitals / clinics / registered practitioners to school for consideration of deducting such expenses. (The ceiling of deductible amount for each family member is \$23,310* per year in 2024/25).

* Amount will be adjusted based on data from the SFAA.

Part VI: Applicant's bank account information for school fee refund

[illegible]

Part VI: Declaration

I, _____ (name), declare that the information in this application form and the supporting documents provided by me are true, complete and accurate to the best of my knowledge. I am aware that Chinese Y.M.C.A. Secondary School (the School) will rely on the information provided by me to determine the eligibility and the percentage of fee subsidy to be offered under the Scheme. I also understand that any commission / misrepresentation of information with a view to obtaining pecuniary advantage by deception is an offence and is liable to legal proceedings.

I authorize the School to handle the personal data/information provided in this application and I will undertake to inform my family members of such an arrangement. I also give consent to the School to release my and my family members' personal data to various authorities concerned for the purpose of processing my application or verifying the information provided in this application.

I agree to let the School check and counter-check this application. If I refuse to co-operate, I undertake to refund all the fee subsidy already received by me.

Signature of the Applicant	HKID Number	Date

Part VI: Method of Assessment and Levels of Assistance

Students who have had their applications officially approved will receive subsidies worth from half to full amount of the school tuition fees in installments.

- The school will use the "Adjusted Family Income"(AFI) mechanism, currently used by the Student Financial Assistance Agency, HKSAR, as the means test to assess the eligibility of an applicant's family for the student-applicant's fee subsidy.

The AFI is calculated based on the following formula:

$$\text{AFI} = \frac{\text{Gross Total Annual Income of the Family}}{\text{Number of Family Members} + (1)}$$

- Gross Total Annual Income of the Family* includes: the total annual income of the applicant and his/her spouse; 30 % of the total annual income of unmarried child(ren) residing with the family if applicable.
- Family Members* refer to: the applicant, his/her spouse, unmarried child(ren) of the applicant residing with the family, the dependent parent(s) of the applicant and/or his/her spouse (who are not receiving Comprehensive Social Security Assistance).
- In case of single-parent families, the +(1) factor in the denominator of the AFI formula will be increased to +(2).
- The AFI eligibility benchmarks for various levels of assistance are set out in the table below. Please note that the AFI is not the average monthly income of a family.

AFI (HK\$)	Level of Assistance
0 – 54,999	Full
55,000 – 87,846	Half
≥ 87,847	Ineligible

For families with AFI above the thresholds and/or more than 5 family members, the school will consider their applications on a case-by-case basis.

- For enquiries, please call 2540 8650 during office hours.

****The school reserves the right to verify the information, through home visit or by other means, provided by the applicant in support of the application.**

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
<ol style="list-style-type: none"> 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, excluding Mandatory Provident Fund (MPF) / Provident Fund contribution by employee) 2. Double pay / Leave pay 3. Allowance (including overtime work / living / housing or rent / transport / meals / education / shift allowance, etc.) 4. Bonus / Commission / Tips 5. Studentship 6. Wages in lieu of notice of dismissal 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. 8. Alimony 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) 10. Interests from fixed deposits, stocks, shares and bonds, etc. 11. Rental income of property, land, carpark, vehicle or vessel (including Hong Kong, the Mainland and overseas) 12. Monthly pension / Widow's & Children's Compensation 	<ol style="list-style-type: none"> 1. Financial assistance from the Government, or payment from the assistance programme under the Community Care Fund (such as CSSA / Old age allowance / Old age living allowance / Disability allowance / Retraining allowance / Work Incentive Transport Subsidy / Working Family Allowance etc.) 2. Long service pay / Contract gratuity 3. Severance pay 4. Loans 5. Lump sum retirement gratuity / Provident fund 6. Inheritance 7. Charity donations 8. Insurance / accident / injury indemnity 9. MPF / Provident Fund contribution by employee (the ceiling of contribution needs not to be reported is \$18,000 per year)

If the applicant, the applicant's spouse or any family member under employment has / have provided the Income Certificate (i.e. Appendix 3a) or the Self-prepared Income Breakdown (i.e. Appendix 3b) as the income proof, the school may still require the applicant to concurrently provide the bank passbook, salary statement or other income proof for reference. If applicant cannot provide any income proof for special reasons, please notify the school in writing, providing justifiable reasons and the detailed calculation of income. Applicant should also sign on the explanatory letter personally. In assessing the family income, if necessary, the school may require the applicants to provide documentary proof of items which is not listed above or seek further clarification for amounts that were used for maintaining the living of the family but have not been accounted for in the application such as savings, loans. The school may also request the applicant to produce documentary proof including bank savings records, duly signed declaration from the debtor, etc. In case no valid proof is provided, the amounts for maintaining the living of the family may be taken as part of the family income.

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.)

<p>Copy of the HK Smart ID Card of the applicant</p>	<p>Copy of the HK Smart ID Card of the spouse</p>
<p>Copy of the HK Smart ID Card of family member</p>	<p>Copy of the HK Smart ID Card of family member</p>
<p>Copy of the HK Smart ID Card of family member</p>	<p>Copy of the HK Smart ID Card of family member</p>
<p>Copy of the HK Smart ID Card of family member</p>	<p>Copy of the HK Smart ID Card of family member</p>

Income Certificate

(For salaried employed person)

This is to certify that _____ (HKID Card No. _____) is employed by this company as _____. His / Her total salary (including allowance, bonus, double pay, leave pay and other income (including Hong Kong, the Mainland and oversea), but excluding Mandatory Provident Fund / Provident Fund contribution by employee, in actual figure) during the period from _____ to _____¹ is HK\$ _____. (Please specify the currency if salary paid is not HK\$: _____)

Signature of Employer: _____

Name of Employer : _____

Company Chop: _____

Telephone No: _____

Company Address: _____

Date: _____

(Note: The original copy of this Certificate must bear the company chop and telephone number of the employer. Employer's initial is required against any deletion / amendment.)

¹ Twelve months period preceding the month of your application.

#Please delete the inappropriate sentence.

WARNING: The personal data given in this statement should be true and complete. Any person who obtains property / pecuniary advantage by deception is liable on conviction to imprisonment for a maximum of 10 years under the Theft Ordinance, Chapter 210.

Self-prepared Income Breakdown

(For hawker / construction worker / renovation worker / casual worker / cleaner who cannot provide income proof)

WARNING: The personal data given in this statement should be true and complete. Any person who obtains property / pecuniary advantage by deception is liable on conviction to imprisonment for a maximum of 10 years under the Theft Ordinance, Chapter 210.

Name of the family member engaged in the following business : _____

(Each self-prepared income breakdown should contain the income information of ONE family member only.)

The relationship between this family member and the applicant: *Applicant / Spouse / Child (*please delete the inappropriate items)

Nature of Industry (e.g. Construction) : _____

Position (e.g. construction worker) : _____

Actual Income (Twelve months period preceding the month of your application, please fill in actual figure. If you do not have any income in a specific month, please fill in \$0. Do not leave any month blank.)

(YY/MM)	Income(HK\$)	(YY/MM)	Income(HK\$)	(YY/MM)	Income(HK\$)
1.		5.		9.	
2.		6.		10.	
3.		7.		11.	
4.		8.		12.	

Total Annual Income HK \$: _____ (Please specify the currency if money paid is not HK\$: _____)

Payment method (Please put "✓" in the appropriate box. More than one item may be selected)

- ☐ A. By Cash / Cash cheque
- ☐ B. By Cheque / direct credit (Please provide a copy of the transaction record together with the page showing the name of the bank account holder, circle the entries and highlight the total amount with color for verification. For any entries other than income, please also make necessary remarks next to them, or else the school may include the amount in calculating your family income.)

Reason for not being able to provide income proof (Please put "✓" in the appropriate box.)

- ☐ A. I have no fixed employer.
- ☐ B. The company I worked for has wound up and I cannot obtain documentary proof from the ex-employer and do not have other income proof.
- ☐ C. Other, please specify: _____

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

Signature of family member engaged in the above business (if not the applicant) : _____

Applicant Name: _____ Applicant HKID No: _____

Applicant Signature: _____ Date : _____

WARNING: The personal data given in this statement should be true and complete. Any person who obtains property / pecuniary advantage by deception is liable on conviction to imprisonment for a maximum of 10 years under the Theft Ordinance, Chapter 210.

Profit & Loss Account (For self-employed taxi driver / lorry driver / minibus driver etc.)	Profit & Loss Account (For person running business (including sole proprietorship / partnership business))
Name of family member engaged	Name of family member running the
in the following business : _____	following company (Owner) : _____
Taxi driver / Lorry driver / Minibus driver (please circle)	Company name : _____
Vehicle owner / Vehicle lessee (please circle)	Nature of business : _____
License number (for vehicle owner only) : _____	Company address : _____
(I) Profit and Loss Account (Twelve months period preceding the month of your application)	Sole proprietorship or partnership : _____ (%)
(From ____/____/____ to ____/____/____)	(If it is a partnership, please specify the profit sharing ratio, e.g. Partnership (50%))
<u>Income</u> (HK\$)	(I) Profit and Loss Account (Twelve months period preceding the month of your application)
	(From ____/____/____ to ____/____/____)
1. Rent (for vehicle owner only) \$ _____	(A) Gross Income (HK\$) \$ _____
2. Profit from operating business \$ _____	<u>Expenditure</u> (HK\$)
3. Other (please specify all items & breakdown of amounts)	(The following is the running cost of the company and should not cover any household expenses .)
\$ _____	Cost on purchasing merchandise \$ _____
(A) Total Income \$ _____	Water charges \$ _____ Electricity charges \$ _____
<u>Expenditure</u> (excluding vehicle mortgages) (HK\$)	Gas charges \$ _____ Telephone charges \$ _____
(1&2 are applicable to vehicle lessee, 2 & 5 are applicable to vehicle owner)	Rent and rates \$ _____ Insurance premium \$ _____
1. Vehicle rental fee \$ _____	Salary of employees other than those marked" #" \$ _____
2. Fuel charges \$ _____	Transportation cost \$ _____ Traveling expenses \$ _____
3. Insurance premium \$ _____	Fees for repair and maintenance of machinery \$ _____
4. Maintenance fee \$ _____	Others (please specify all items & breakdown of amounts) \$ _____
5. License fees \$ _____	<u>Other Expenditure</u> (HK\$)
6. Others (please specify all items & breakdown of amounts) \$ _____	# Salary of owner paid by this company \$ _____
(B) Total Expenditure \$ _____	# Salary of other family member paid by this company
Net profit((A) Total Income - (B) Total Expenditure*)	(Name : _____) \$ _____
\$ _____	(B) Total Expenditure (HK\$) \$ _____
(This amount should be filled in Part IV of the Household Application Form.)	Household Income= (A) Gross Income – (B) Total Expenditure* + Salary of owner /
* If Total Income is less than Total Expenditure (i.e.(A)-(B)< 0) · deficit will not be counted i.e. business	other family member paid by this company# = HK\$ _____
loss cannot be deducted from the gross household income.	(This amount should be filled in Part IV of the Household Application Form.)
Remark (reason for not being able to provide income proof) :	* If Total Income is less than Total Expenditure (i.e.(A)-(B)< 0) · deficit will not be counted i.e. business
_____	loss cannot be deducted from the gross household income.
Signature of the family member engaged in the above business	Remark (reason for not being able to provide income proof) :
(if not the applicant) : _____	_____
Applicant's Name : _____	Owner's Signature (if not the applicant) : _____
Applicant's HKID No : _____	Applicant's Name : _____
Applicant's Signature : _____	Applicant's HKID No : _____
Date : _____	Applicant's Signature : _____
	Date : _____

2025/26 Application for Fee Subsidy**Declaration**

To: Chinese Y.M.C.A. Secondary School

School Affairs Office

I (Name in full) _____ holder of HKID card No. _____ · From _____ / _____ / _____ to _____ / _____ / _____ due to Employment / unemployed / retired (please circle) , there is no other source of income.

I declare that the above information is true and complete.

Signature : _____

Date : _____

2025/26 Application for Fee Subsidy**Declaration**

To: Chinese Y.M.C.A. Secondary School

School Affairs Office

I (Name in full) _____ holder of HKID card No. _____ · From _____ / _____ / _____ to _____ / _____ / _____ due to Employment / unemployed / retired (please circle) , there is no other source of income.

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