



Little Dalton Kindergarten (West Kowloon)
 道爾頓幼稚園 (西九龍)
 Unit B, G/F, Imperial Cullinan,
 10 Hoi Fai Road, Kln
 九龍海輝道 10 號瓏璽地下 B 室
 T 電話 +852 3612 5760
 F 傳真 +852 3612 5766
 E 郵箱 admic@littledalton.com

"I am not led, I lead"

Pre-Kindergarten Application Form

FOR SCHOOL USE 學校備用		Applicant's Photo 申請人近照 (taken within the past three months 需於最近3個月內拍攝)
Date Received 收到日期 _____	Start Date (____ / ____ / ____) 入學日期 Year 年 / Month 月	
Application No. 申請編號 _____		
Fee Received 已收費用 _____	Cheque No. 支票號碼: _____	
Remarks 備註 _____		

Class preference (please put 1 for first choice, 2 for second choice, etc.)

班級選擇 (請填寫 1 作為您的第一選擇, 2 作為您的第二選擇)。

Mon to Fri morning (8:45 am to 11:45 am) 週一至週五上午		Mon to Fri afternoon (1:00 pm to 4:00 pm) 週一至週五下午	
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Part I a) PERSONAL DETAILS OF APPLICANT 申請人個人資料

Applicant's Full Name _____ (SAME as on travel document/HKID)
 申請人英文姓名 Surname 姓 First 名 Middle 字 必須與護照或香港身份證的姓名相同

Nickname (if any) _____ Chinese Name _____ HKID/Passport No. _____
 暱稱(如適用) 申請人中文姓名 (SAME as on travel document/HKID) 香港身份證/護照號碼
必須與護照或香港身份證的姓名相同

Gender 性別 Male 男 Female 女 Hong Kong Permanent Resident 是否香港永久居民 Yes 是 No 否

Date of Birth _____ Place of Birth _____ Citizenship _____
 出生日期 Day 日 / Month 月 / Year 年 出生地點 國籍

Applicant's First Language _____ Other Language(s) _____
 申請人第一語言 其他語言

Entrance Year _____ Start Date _____
 申請人讀學年 入學日期 Year 年 / Month 月

Part I b) PLAYGROUP OR PRE-SCHOOL EXPERIENCE 申請人就讀概況

School Attending 就讀學校	Dates Attending 就讀日期	Days per week/ Session 日數/時段

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Part I c) EXTRACURRICULAR ACTIVITIES OF APPLICANT 申請人課外活動紀錄

Please list out the extracurricular activities in which the applicant has participated in during the past year.

請列出申請人過去一年參加的課外活動。

Activity 活動名稱	Dates Attending 日期	Activity Organizer 主辦機構	Days per week/ Session 日數/時段

Part I d) PERSONAL HISTORY OF APPLICANT 申請人背景資料

	"✓" as appropriate 於適當格內加上"✓" 號	
1. Does the applicant have any health, emotional, behavioral, psychological, learning or developmental delay concerns, issues or difficulties, diagnosed or otherwise? 申請人是否有健康、情緒、行為、心理、學習、個人發展上的問題? 此問題不限於已被診斷的症狀。	<input type="checkbox"/> No 沒有	<input type="checkbox"/> Yes 有
2. Has the applicant ever consulted with or received any form of service from a psychiatrist/psychologist/counselor/social worker/therapist or persons of similar professions? Please provide the report(s), if any. 申請人是否曾接受精神科醫生 / 心理學家 / 輔導員 / 社工 / 治療師等專業人士的服務或諮詢? 如有, 請提交有關報告。	<input type="checkbox"/> No 沒有	<input type="checkbox"/> Yes 有
Should the applicant be accepted by the school, I hereby agree to have the school contact the relevant professional to obtain information about my child. I understand that such information will be kept confidential and will only be accessible to parties as deemed relevant by the school. 如申請人獲本校取錄, 本人謹此同意學校聯絡有關之專業人士以便了解申請人的資料。本人明白此資料將會被保密及只供學校或學校界定之相關人員使用。	<input type="checkbox"/> Agree 同意	<input type="checkbox"/> Not Agree 不同意

Part II FAMILY DATA 家庭資料

Applicant's parents 申請人父母: Married 已婚 Separated 分居 Divorced 離婚 Other 其他

Father's/Guardian's Particulars 父親/監護人資料

Father's/Guardian's Name
父親/監護人英文姓名 _____
Chinese Name
中文姓名(if any 如有) _____
Citizenship
國籍 _____
Hong Kong Permanent Resident 香港永久居民 Yes 是 No 否
HKID/Passport No.
香港身份証/護照號碼 _____
First Language/Dialect
第一語言/方言 _____
Other Language(s)
其他語言 _____

Mother's Particulars 母親資料

Mother's Name
母親英文姓名 _____
Chinese Name
中文姓名(if any 如有) _____
Citizenship
國籍 _____
Hong Kong Permanent Resident 香港永久居民 Yes 是 No 否
HKID/Passport No.
香港身份証/護照號碼 _____
First Language/Dialect
第一語言/方言 _____
Other Language(s)
其他語言 _____



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Father's/Guardian's Particulars 父親/監護人資料

Mother's Particulars 母親資料

Home Address
父親/監護人住址

Home Address
母親住址

Home Telephone
住宅電話

Home Telephone
住宅電話

Company Name
工作機構

Company Name
工作機構

Position/Title
職位

Position/Title
職位

Company Address
工作地址

Company Address
工作地址

Work Telephone
工作電話

Work Telephone
工作電話

Mobile
流動電話

Mobile
流動電話

Email Address
電郵地址

Email Address
電郵地址

High School/University(s)
Attended, if any
曾就讀中學及/或大學如有

High School/University(s)
Attended, if any
曾就讀中學及/或大學如有

Highest Degree Earned
獲最高的學歷

Highest Degree Earned
獲最高的學歷

English Language Proficiency
英文語文能力

Fully Literate 完全能讀會寫
 Partially Literate 部份能讀會寫
 Not Literate 完全不能讀寫

English Language Proficiency
英文語文能力

Fully Literate 完全能讀會寫
 Partially Literate 部份能讀會寫
 Not Literate 完全不能讀寫

Chinese Language (Putonghua) Proficiency
中文(普通話)能力

Fully Literate 完全能讀會寫
 Partially Literate 部份能讀會寫
 Not Literate 完全不能讀寫

Chinese Language (Putonghua) Proficiency
中文(普通話)能力

Fully Literate 完全能讀會寫
 Partially Literate 部份能讀會寫
 Not Literate 完全不能讀寫

The sibling(s) is/are currently attending 申請人兄弟姊妹現時就讀情況:

	Name of Siblings 兄弟姊妹姓名	Gender 性別	School 學校	Age 年齡	Current Grade 現正就讀年級
1.					
2.					
3.					
4.					



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Part III) APPLICATION CHECKLIST 入學申請所需文件清單

Applications will only be processed when **ALL FOUR** items listed below are received. Please "✓" as appropriate.
申請必須備齊以下四項資料方會受處理。請於適當格內加上"✓"號。

- (1) Non-refundable Application Fee of HK\$40 (cheque payable to "Little Dalton Kindergarten") *
不獲退還的報名費港幣四十元正 (支票抬頭: Little Dalton Kindergarten) *
- (2) Applicant's Identity Document 申請人的身份證件複印本
 - (a) Applicant's HKID Copy 申請人的香港身份証複印本
OR 或
 - (b) Valid Passport Statistics Page AND HK Visa Stamp Page AND parents' copy of valid HK work permit
申請人的有效護照(包含香港簽證頁)複印本及申請人父母證明在香港工作的簽證複印本
- (3) Applicant's Birth Certificate Copy 申請人的出生證明書複印本
- (4) 4 passport size photos, including one affixed to this application form 4張護照尺寸照片, 包括1張貼於申請表上

* As approved by EDB based on user-paid principle and determined on cost-recovery basis.

^ Please note that since we require the original signature from the parent, email or fax is not accepted for submission of application form.

Part IV) PARENTAL AGREEMENT 家長同意書

- 1) I authorize the school to use and transfer the data contained in this application form to the school's database(s) or to such third party service providers to Little Dalton Kindergarten and to archive it for the purposes of providing educational services and any other incidental purposes including maintaining such records as customary or usual for pre-kindergarten or kindergarten services or as required by the educational or other authorities.
本人授權學校使用和將此申請表的資料輸入至學校或相關機構的資料, 並以恰當的方式在學校歸檔, 以用於教育服務和配合政府教育部門的需要。
- 2) I understand that if I fail to provide accurate details of important information about this applicant, Little Dalton Kindergarten reserves the right to withdraw the applicant's place in the school. 本人明白如本人未能提交申請人正確的資料, 道爾頓幼稚園可保留一切追究的權利, 包括取消申請人的入學資格。
- 3) In signing this application, I grant Little Dalton Kindergarten permission to obtain records from the applicant's previous school(s).
本人允許道爾頓幼稚園向申請人現在及曾經就讀的所有學校索取學生記錄。

The data collected in this form will be used and stored in accordance with the provisions of the Personal Data (Privacy) Ord. Cap. 486 of Hong Kong. 本表格所收集的所有資料都會按照香港特別行政區法例《個人資料(私隱)條例》- 第 486 章規定下使用及儲存。

Signature of Applicant's Parent/Guardian
申請人家長/監護人簽署

Date
日期

Name in Full: