

## S.H. Ho College Student Activity Fund Application Form

## 善衡書院學生活動基金申請表



## Notes to Group:

## 申請團體須知:

- Please read the notes for application about Student Activity Fund before filling in the application form.
- 在填寫申請表前，請先細閱善衡書院學生活動基金《申請須知》。
- Please submit the completed form and the activity proposal with budget plan to Dean of Students' Office of S.H. Ho College.  
請將填妥的申請表連同活動建議書和財政預算一併交回善衡書院學生輔導處。
- This application form should be completed in **BLOCK LETTERS**.  
請以**正楷**填寫此表格。
- The information provided will be used for selection-related purposes in the college. It may be accessible to offices, committees and persons who will process the selection matters. Information on unsuccessful applicants will be destroyed after the selection exercises when no longer required.
- 申請團體所提供的資料將用作處理申請有關事宜，並會供書院有關部門、委員會或其他處理申請的人士查閱。處理程序完成後，未獲錄取的申請團體資料，當無須保留時將全部銷毀。

## (A) Data of Applicant 申請者資料

Name of Activity 活動名稱			
Name of Applicant 申請人姓名	(English)	(中文)	
*Sex 性別	Male 男 / Female 女	Student I.D. No. 學號	
Type of Students 學生類別	<input type="checkbox"/> 香港 Hong Kong <input type="checkbox"/> 內地 Mainland <input type="checkbox"/> 海外 Overseas	Place of Birth 出生地點	
HKID 香港身份證/ Passport No. 護照號碼		Date of Birth (DD/MM/YY) 出生日期 (日/月/年)	/ /
Faculty 學院		Department 學系	
Major 主修		Minor 副修	
Year of Study 年級		Year of Graduation 畢業年份	
Residential Address 住址 (in English)			
Residential Phone No. 住宅電話		Mobile Phone No. 手提電話	
E-mail 電郵			

<b>(B) Details of Activity 活動計劃資料</b> (Please attach a proposal and a detailed budget plan)(請附加一份活動計劃書及一份詳細的財政預算)				
Name of Activity 活動之名稱				
Nature of Activity 活動之性質	(可選擇下列一或多個選項) (choose one or more of the following options) *社會服務 Community Services / 環境保育 Environmental Care / 健康生活 Healthy Living / 康體文藝 Sports and Recreation			
Location of Activity 活動進行地點				
Date and Time of Activity 活動進行日期和時間				
Date/ Period of the activity held in the past 活動過往舉辦日期/時期 (如適用)	Academic Year 學年 (e.g. 2013-14)			
	日期/時期			
Budge Plan in the Current Year 本年度支出預算				
Amounts of Expenditure in the past: 過往支出金額: (如適用)	Academic Year 學年 (e.g. 2013-14)			
	Total Expenditure 總支出			
Project Advisor 指導老師 (如適用) (If Necessary)	Name 姓名		Position 職位	
	Department 學系		Contact No. 聯絡電話	

<b>(C) Group Member List (組員名單) (For Group Applicant Only)</b>			
English Full Name (英文全名)	Position(職位)	Student ID. No. (學生編號)	College (書院)

\*Please delete where inappropriate  
\*刪去不適用者

**(D) Declaration 聲明**

- ✓ I understand that if I knowingly supply false information, S.H. Ho College shall have the right to rescind subsidy and request returning all the received subsidy to S.H. Ho College.
- ✓ 茲聲明以上提供的資料均屬真確無訛。本人明白倘若故意虛報資料，善衡書院將取消資助。縱使已批發資助金，本人亦須退還。
- ✓ I have read the notes for applicants and the term of applying Student Activity Fund, and willing to obey rules of the notes.
- ✓ 本人已詳閱善衡書院學生活動基金的《申請須知》，並願意遵從當中的守則。

Applicant's Signature 申請人簽署:

Date 日期: