

Li Cheng Uk Government Primary School

43 Tonkin Street, Sham Shui Po, Kowloon

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Notice: 6/2022-23

13.9.2022

To: Parents / Guardians,

<u>Survey on receiving Comprehensive Social Security Assistance (CSSA) or full grant under the Student Financial Assistance Schemes (SFAS)</u>

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 16.9.2022 (Friday).

| | | Smch |
|---------------|----------------------|--|
| | | (Ms CHUI Sau-man) |
| | | Headmistress |
| | | XXXX |
| | | Reply Slip |
| Sur | vey on | receiving Comprehensive Social Security Assistance (CSSA) or full grant under |
| the | Studen | t Financial Assistance Schemes (SFAS) |
| | | Notice: 6/2022-23 |
| | | Date: |
| | admistre ave read | the School Notice No.6/2022-23 dated 13.9.2022 and I fully understand its content. |
| I am | | a recipient of the Comprehensive Social Security Assistance (CSSA) from the Social Welfare Department. (CSSA Ref. No. :) |
| | | a recipient of the Full Grant School Textbook Assistance. |
| | | a recipient of the Half Grant School Textbook Assistance. |
| | | <u>NOT</u> a recipient of the Comprehensive Social Security Assistance (CSSA) from the Social Welfare Department or School Textbook Assistance |
| | ONE " | ✓" only |
| P | Please pu | t a "√" in the appropriate box and fill in CSSA reference number if necessary. |
| Pupil's Name: | | () Class: P |
| Parent's | s / Guard | lian's Signature: |