



Li Cheng Uk Government Primary School

43 Tonkin Street, Sham Shui Po, Kowloon

Tel : 2386 8049

Fax : 2708 9950

Website: <http://www.lcu.edu.hk>

Email : lcugps@edb.gov.hk

Special Notice: 61/2024-25

24.10.2024

To: Parents/Guardians of students concerned,

Micro:bit Learning After-school Program (1st Term)

To empower learning through coding and engineering, the Micro:bit Learning After-school Program will be carried out in our school and your child is selected to join. Details are as follows:

October, November, December & January				
Date	Month	Week	Tuesday	Thursday
		9th		31/10
	Nov	10th	5/11	7/11
		11th	No lesson (Exam)	
		12th	No lesson (Exam)	21/11
		13th	No lesson (Discretionary holiday)	28/11
	Dec	14th	No lesson	No lesson
		15th	No lesson	No lesson (Parents' Day)
		16th	17/12	No lesson (Christmas Party)
		17th	Christmas Holiday	
		18th	Christmas Holiday	2/1
	Jan	19th	7/1	9/1
		20th	14/1	16/1
		21st	21/1	23/1
Venue	Computer Lab (LCUGPS)			
Time	3:30 p.m. – 4:45 p.m.			

Please return the reply slip to Ms Lai on or before 30.10.2024 (Wednesday). For enquiry, please contact Ms Lai at 2386 8049. Thank you for your attention.

(Ms CHUI Sau-man)
Headmistress

Reply Slip

Micro:bit Learning After-school Program (1st Term)

Special Notice : 61/2024-25

Date: _____

To: Headmistress,

I have read the Special Notice No.61/2024-25 dated 24.10.2024 and I fully understand its content.

- * ☐ My child / ward would like to join the said activity.
☐ My child / ward is not available to join the said activity.

Normal Way of going home: * <input type="checkbox"/> Parents' Team <input type="checkbox"/> School Bus Team (Sch Bus No. _____) <input type="checkbox"/> Go home alone <input type="checkbox"/> Go home with brother(s)/ sister(s) (Name: _____ P. _____) (Name: _____ P. _____)	Way of going home after activity: * <input type="checkbox"/> Pick up by parents <input type="checkbox"/> Go home alone <input type="checkbox"/> Go home with brother(s)/ sister(s) (Name: _____ P. _____) (Name: _____ P. _____)
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Student's name : _____ (_____) Class P. _____

Parent's/Guardian's Signature : _____

Contact telephone number: _____

Remarks: * Please ✓ in the appropriate boxes.