

YAN CHAI HOSPITAL LAW CHAN CHOR SI COLLEGE 仁濟醫院羅陳楚思中學
APPLICATION FOR CERTIFICATE OF ATTENDANCE 就讀證明申請表

English Name: _____ 中文姓名: _____

I.D.No. 身份證號碼: _____ () Contact No. 聯絡電話: _____

e-mail address 電郵地址: _____

Address 地址: _____

Date of admission 入學日期: ____/____/____ Date of leaving 離校日期: ____/____/____

Highest Level (Class) attended 離校前所就讀之班別: _____

Is your withdrawal processed (if applicable)? Yes/ No 是否已辦妥退學手續(如適用)? 是 / 否

Reasons for applying certificate of attendance 申請就讀證明原因:

Applicant's Signature

Date

申請人簽署: _____

日期: _____

NB 附錄

1. To verify true copies, you are required to bring the latest report card to school to make copies. 為證明最後一年成績表無誤, 請於遞交表格時帶同正本, 以便職員代為複印。
2. You can only apply for the certificate of attendance once. A certified true copy of the certificate will be issued for the second application. 你只能申請就讀證明一次, 第二次申請將予第一次就讀證明的學校認證之副本。
3. The application procedure will take at least 5 working days. 申請程序需時最少五個工作天。

取推薦信後

Signature of Student

學生簽署: _____

Date

日期: _____