

Application for Admission (2024/25)

Application No.: \_\_\_\_\_

入學申請表格 (2024/25)

(Office Use only)

Auditing  Visiting

**IMPORTANT NOTES 注意事項**

- This form should be completed in English BLOCK letters.  
請以英文正楷填寫申請表。
- Applications can be submitted BY EMAIL to the University / College: [apply@sfu.edu.hk](mailto:apply@sfu.edu.hk)  
填妥的申請表可電郵方式交回本院校: [apply@sfu.edu.hk](mailto:apply@sfu.edu.hk)
- Applicants are requested to submit together with this form PHOTOCOPIES of documentary evidence of their academic/professional credentials, work experience and other relevant documents.  
填妥的申請表，須連同學歷/專業資格、工作經驗文件及其他相關證明文件副本一併繳交。
- Applicants will be required to produce the originals of all relevant documents for certification.  
申請人須出示有關文件的正本，以便本院校核對資料。
- Failure to provide the required information may cause delay or render the University / College unable to further process the application.  
申請人若未能提供所需資料，將導致延誤，或令本院校不能進一步處理此申請。

**PART A PERSONAL PARTICULARS 個人資料**

Name in English (Must be identical with your HKID Card/ Passport) 英文姓名 (必須與香港身份證/護照相同)

Surname 姓	First / Other Names 名
<input type="text"/>	<input type="text"/>

Name in Chinese 中文姓名	<input type="text"/>	HKID / Passport No. * 香港身份證/護照號碼*	<input type="text"/>
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Date of Birth 出生日期	<input type="text"/>	Sex 性別	Male / Female* 男 / 女*
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Nationality 國籍	<input type="text"/>	Language used at Home 日常用語言	<input type="text"/>
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Religion (Optional) 宗教(可選擇自由填報)	<input type="text"/>
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Residential Tel. No. 住宅電話號碼	<input type="text"/>	Daytime Contact Phone No. 日間聯絡電話號碼	<input type="text"/>
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E-mail Address 電郵地址	<input type="text"/>
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School / College / Institute Attending (or Last Attended) 現(或最近)就讀學校/院校

Require Student Visa / Entry Permit to Study in Hong Kong  No  Yes  
要申請學生簽證 / 進入許可可在港就讀 不要 需要

If yes, please fill out  
如要申請學生簽證，請填寫

Country 國家	<input type="text"/>	State/District 州/地區	<input type="text"/>
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(For Mainland China Applicant Only) Household Registration (Province/Autonomous Region/City)

(只供內地申請人填寫)戶籍



**PART C PUBLIC EXAMINATION RESULTS 公開考試成績**

HKDSE Examination 香港中學文憑考試					
Year 年份	Subjects 考試科目	Grade/Level 等級	Year 年份	Subjects 考試科目	Grade/Level 等級
	<b>Cores:</b>			<b>Electives:</b>	
	Chinese Language			Elective 1: _____	
	English Language			Elective 2: _____	
	Mathematics			Elective 3: _____	
	Citizenship and Social Development			Elective 4: _____	
	Liberal Studies			<b>Others:</b>	
				Applied Learning: _____	

Other Public Examinations / Other Qualifications 其他公開考試/其他學歷			
Year 年份	Examination / Qualification 考試名稱 / 學歷 [e.g. HKCEE, HKALE, GCE / GCSE / IGCSE, 國家統一高考, SAT, IB, etc.]	Subjects 考試科目 [Please indicate the level of subject, i.e. A-Level / AS-Level] [如適用, 請指明科目程度, 即高級程度/高級補充程度]	Grade / Level / Score 等級 / 分數
		Chinese Language	
		English Language	

1. IELTS 雅思試: Year 報考年份: \_\_\_\_\_ Score 考獲分數: \_\_\_\_\_
2. TOEFL 托福試: Year 報考年份: \_\_\_\_\_ Score 考獲分數: \_\_\_\_\_  
Written test 試卷試  / iBT test 電腦試
3. TOEIC 多益試: Year 報考年份: \_\_\_\_\_ Score 考獲分數: Listening 聽力 \_\_\_\_\_ Reading 閱讀 \_\_\_\_\_

**PART D EDUCATION (SECONDARY AND POST-SECONDARY EDUCATION)**

教育程度 (中學及大專教育)(in reverse chronological order 倒序填寫)

Period 修讀年份		School / Institution 就讀學校/院校名稱	Country/District/Province (e.g. HK, Shatin) 國家/地區/省 (例如: 香港 沙田)	Form / Grade 級別		Programme Studied and Highest Qualifications Attained 修讀課程及考獲最高學歷 (If graduated, please <input checked="" type="checkbox"/> ) (如已畢業, 請 <input checked="" type="checkbox"/> )
From (mm / yy) 由 (月/年)	To (mm / yy) 至(月/年)			From 由	To 至	
						<input type="checkbox"/> (GPA: _____ out of _____)
						<input type="checkbox"/> (GPA: _____ out of _____)
						<input type="checkbox"/> (GPA: _____ out of _____)
						<input type="checkbox"/> (GPA: _____ out of _____)
						<input type="checkbox"/> (GPA: _____ out of _____)

**PART E OTHER ACADEMIC / PROFESSIONAL QUALIFICATIONS 其他學歷 / 專業資格**  
(in reverse chronological order 倒序填寫)

Qualification Obtained 學歷 / 專業資格	Obtained By (e.g., examination, election, exemption) 獲取途徑 (如考試、推選、科目豁免)	Name of Awarding Body 頒授機構名稱	Date Obtained 取得日期

**PART F WORK EXPERIENCE 工作經驗** (in reverse chronological order 倒序填寫)

From (mm / yy) 由 (月/年)	To (mm / yy) 至 (月/年)	Name of Organisation 機構名稱	Position Held 職位	Full-time / Part-time 全職/兼職

Note: Applicants will be required to provide the originals of all relevant supporting documents for verification.  
 註: 申請人須出示有關文件的正本, 以作核實之用。

**PART G DISABILITY 傷健人士**

Are you a person with disability / (ies)?  No  Yes  
 你是否傷健人士? 否 是

If yes, please indicate nature and degree of disability / (ies).  
 若是, 請註明有關性質及程度。

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All applicants will be considered on an equal basis. The collection of information about the nature and degree of any disability / (ies) will be used by the University / College to assess the provision of facilities to assist students in their studies.  
 本院校以劃一準則考慮所有入學申請。在此欄填報的資料, 有助本學校衡量提供設施協同學學習。

## PART H DECLARATION 聲明

1. I declare that all the information given in this form is true and complete to the best of my knowledge. I understand that provision of any false or misleading information shall lead to disqualification of application without notice and cancellation of registration. Under such circumstances, all fees paid, if applicable, will not be refundable or transferable.  
本人謹此聲明在申請表內填報的資料均屬正確及完備。本人明白若提供任何虛假或誤導性資料，本人的申請資格將被取消，雖經註冊，亦屬無效，所繳費用（如適用）概不發還或轉讓他人。
2. I understand that the information contained in this form will be used for processing my application for admission to Saint Francis University / Caritas Bianchi College of Careers.  
本人明白在本表格所填報之資料，會使用於入學遴選及一切有關申請就讀聖方濟各大學 / 明愛白英奇專業學校課程的事宜。
3. Upon completion of the admission selection:  
當甄選入學過程完結：
  - (a) I understand that personal data provided in the enrolment forms of unsuccessful candidates will be destroyed by the University / College.  
本人明白如入學申請不被接納，聖方濟各大學 / 明愛白英奇專業學校將銷毀一切有關的個人資料。
  - (b) I also understand that once being enrolled in a programme, the relevant information will become part of my student record and will be used for all purposes relating to my studies.  
本人並明白有關資料於註冊後將轉作學生記錄，聖方濟各大學 / 明愛白英奇專業學校會使用該等記錄處理一切與本人在學有關事宜。
4. I acknowledge that the University / College reserves the right to cancel any programmes and revise the programme contents, if necessary, without prior notice.  
本人明白聖方濟各大學 / 明愛白英奇專業學校保留權利，可因應情況隨時更改所開辦的課程及修訂課程內容。

Signature of Applicant  
申請人簽署

Date  
日期

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