



香港三育書院

HONG KONG ADVENTIST COLLEGE

1111 Clear Water Bay Road, Sai Kung, New Territories, Hong Kong

Tel: (852) 2719-1668 Fax: (852) 2358-1055 Email: info@hkac.edu Web: www.hkac.edu

Application Form 申請表

Personal information is collected for admission purposes only. 所有資料只用作入學申請用途。

| SECTION 1 – STUDENT DETAILS 學生資料 (Please complete in CAPITAL LETTERS 請以大階填寫) | | | |
|---|------------------|---|---|
| Name in English 英文姓名 (as shown on Passport / Hong Kong ID Card) (請按護照 / 香港身份證上所示) | | HK ID No. / Passport No. 香港身份證號碼 / 護照號碼 | |
| Last / Family Name 英文姓 | Given Name 英文別名 | Name in Chinese 中文姓名 | |
| Date of Birth 出生日期 (mm/dd/yyyy) (月/日/年) e.g. Dec 25, 2003 | Age 年齡 | Place of Birth 出生地點 | Gender 性別 <input type="checkbox"/> Female 女 <input type="checkbox"/> Male 男 |
| Religion: 宗教信仰 | Ethnicity: 種族 | Nationality: 國籍 | |
| Home No.: 住宅電話 | Mobile No.: 手機電話 | Email: 電郵 | |
| Mailing Address 通訊地址: | | | |
| District 地區: Area 區域: <input type="checkbox"/> HK 香港 <input type="checkbox"/> KLN 九龍 <input type="checkbox"/> NT 新界 | | | |

Photo
相片

| SECTION 2 – ANTICIPATED DATE OF ENROLLMENT 入學學期 | |
|---|--|
| Year 學年 _____ Semester 學期: <input type="checkbox"/> Fall (September) 秋季 <input type="checkbox"/> Spring (January) 春季 <input type="checkbox"/> Summer (May) 夏季 | |

| SECTION 3 – PROGRAM TO ENROLL 課程報讀 | |
|---|--|
| Andrews University Affiliation Programs (Hong Kong) 安德烈大學聯校課程 (香港) | <input type="radio"/> Bachelor of Science in Psychology (Reg. No.: 261680) 心理學理學士 |
| | <input type="radio"/> Bachelor of Health Science in Wellness, with an Emphasis in Fitness (Reg. No.: 262892) 健康科學理學士 (體適能) |
| | <input type="radio"/> Bachelor of Arts in Religion (Reg. No.: 261684) 宗教學文學士 |
| | <input type="radio"/> Associate of Science in General Business (Reg. No.: 262891) 商務理學副學士 |
| 2+2 Degree Programs 2 + 2 學位課程 | <input type="radio"/> Andrews University Major 主修課程: _____ |
| | <input type="radio"/> La Sierra University Major 主修課程: _____ |
| | <input type="radio"/> Kettering College Major 主修課程: _____ |
| | <input type="radio"/> Pacific Union College Major 主修課程: _____ |
| | <input type="radio"/> Southern Adventist University Major 主修課程: _____ |
| Hong Kong Adventist College Programs 香港三育書院課程 | <input type="radio"/> Walla Walla University Major 主修課程: _____ |
| | <input type="radio"/> Higher Diploma in Health and Rehabilitation Services 健康與復康服務高級文憑 HKCAAVQ No.: 22/000791/L4 Period: 01/11/2022 - 31/05/2024 |
| | <input type="radio"/> Diploma in Pre-University Studies 大學先修文憑 HKCAAVQ No.: 13/000572/L3 Period: 01/09/2012 - 31/08/2024 |

| SECTION 4 – APPLICANT’S EDUCATION 教育程度 (From secondary onward 中學開始填寫) | | | |
|---|------------------------------|----------------------------|---------------------------------|
| Secondary School / College / University 中學 / 大專 / 大學 | From 由 (Year 年) e.g. 2018 | To 至 (Year 年) e.g. 2024 | Qualification 學歷 e.g. Form 6 |
| | | | |
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| SECTION 5 – FAMILY CONTACT INFORMATION 家庭聯繫信息 | | | |
|---|-----------------------|-----------------------|------------------|
| Father 父親 | Name in English 英文姓名: | Name in Chinese 中文姓名: | Occupation 職業: |
| | Mobile Tel. 手提電話: | Email 電郵地址: | |
| Mother 母親 | Name in English 英文姓名: | Name in Chinese 中文姓名: | Occupation 職業: |
| | Mobile Tel. 手提電話: | Email 電郵地址: | |
| Guardian 監護人 | Name in English 英文姓名: | Name in Chinese 中文姓名: | Occupation 職業: |
| | Mobile Tel. 手提電話: | Email 電郵地址: | Relationship 關係: |
| Emergency Contact (Except parents) 緊急聯絡人(除父母以外) | Name in English 英文姓名: | Name in Chinese 中文姓名: | Occupation 職業: |
| | Mobile Tel. 手提電話: | Email 電郵地址: | Relationship 關係: |

| SECTION 6 – REFERENCES 推薦 (For Oversea Student Only 僅限國際學生) | | | | |
|---|----------------------|-------------|------------------|------------|
| Please provide us with two references (<i>individuals not related to you</i>). One of them MUST be a principal, vice-principal, guidance counselor or teacher, pastor or professor. It is essential that you provide us with complete and correct information, including an active email address. 請提供兩名推薦人(和你沒有親屬關係的)。其中一名必須為校長、副校長、監護人或老師、牧師或教授。提供完整及正確的資料，包括一個正在使用的電郵地址。 | | | | |
| Name in English 英文姓名 | Name in Chinese 中文姓名 | Position 職位 | Years Known 認識時間 | Email 電郵地址 |
| | | | | |
| | | | | |

| SECTION 7 – RESIDENCE 住處 | |
|---|---|
| Do you need dormitory services? 你是否需要學校宿舍服務? | <input type="checkbox"/> No 不需要 <input type="checkbox"/> Yes 需要 (<input type="checkbox"/> 5 days 天/ week 星期 <input type="checkbox"/> 7 days 天/ week 星期) |

| SECTION 8 – HOW DID YOU HEAR ABOUT HKAC PROGRAMS? 你如何得知香港三育書院的課程? | | |
|---|---|--|
| <input type="checkbox"/> Magazine / Newspaper / Leaflet 雜誌 / 報紙 / 傳單 (Please specify) (請註明): _____ | <input type="checkbox"/> HKAC Information Day / Open Day 香港三育書院資訊日 / 開放日 | <input type="checkbox"/> Social Media / Website 社交媒體 / 網站 (Please specify) (請註明): _____ |
| <input type="checkbox"/> Friends or Family 朋友或家人 | <input type="checkbox"/> HKAC Program Seminar in Your School 校內的升學講座 | <input type="checkbox"/> HKAC Website (www.hkac.edu) 香港三育書院網頁 |
| <input type="checkbox"/> HKAC / HKAA Staff or Student / SDA Church Member 香港三育書院 / 香港復臨學校職員或學生 / 安息日會教友 (Please Specify) (請註明): _____ | <input type="checkbox"/> Education Expo / Road Show 升學展覽 / 宣傳街站 (Please Specify) (請註明): _____ | <input type="checkbox"/> Others 其他: (Please specify) (請註明): _____ |

| SECTION 9 – REQUIRED DOCUMENTS 所需文件 |
|--|
| <input type="checkbox"/> Application fee: (Local - HK\$200 / Oversea - HK\$500) 報名費: (本地學生 - 港幣 \$ 200 / 海外學生 - 港幣 \$ 500) <input type="checkbox"/> Official copy of public examination result slip (such as: HKDSE) 公開試成績表副本 (例如: 香港中學文憑試) <input type="checkbox"/> Official copy of high school graduation Diploma 中學畢業證書副本 <input type="checkbox"/> Official copy of Form 5 and Form 6 school reports 中五及中六校內成績表副本 <input type="checkbox"/> A copy of HKID Card / Passport 身份證 / 護照副本 1 張 <input type="checkbox"/> 1 Passport-sized photo 證件相尺寸照片 1 張 <input type="checkbox"/> 2 Recommendation Letter (Overseas Applicants Only) 推薦信 2 份 (只適用於海外申請人) |

| SECTION 10 – CONSENT DETAILS 同意書 | | |
|---|--|------------------------------|
| The information I have provided is complete and accurate, and I understand any omission of information could significantly delay my acceptance. I further understand that any falsification of admission documents is reason for immediate cancellation of my application and/or denial or withdrawal of admission to Hong Kong Adventist College programs. If accepted, I agree to abide by the regulations of the institution as published in its Bulletin and Handbook or as announced. I recognize that failure to abide by these regulations is ground for dismissal. 本人所提供的資料是完整及準確，同時明白若資料有任何錯誤將會拖延入學的時間。如有任何虛假文件將會構成本人立即被取消資格/不被接納入讀香港三育書院的原因。如被接納，我同意遵守本校課程指引及手冊所頒佈的校規。本人知道不遵守校規可被刪除學籍。 | | |
| Applicant’s Signature 申請人簽名 | Parent/Guardian’s Signature 家長 / 監護人簽名 | Date (mm/dd/yyyy) 日期 (月/日/年) |
| | | |

| OFFICE USE ONLY (只供校方填寫) | | | |
|--------------------------|--|---|--|
| APPLICATION FORM | DATE RECEIVED IN HKAC _____ (MM/DD/YYYY) | DATE SUBMITTED TO ANDREWS UNIVERSITY _____ (MM/DD/YYYY) | |
| APPLICATION FEE PAID | TUITION \$ _____ DATE _____ (MM/DD/YYYY) | RECEIPT NUMBER _____ | |
| FEES PAID | TUITION \$ _____ DATE _____ (MM/DD/YYYY) | RECEIPT NUMBER _____ | |
| ID# | HKAC _____ | ANDREWS UNIVERSITY _____ | |