



Application No. (for school use only): \_\_\_\_\_

## CHEUNG SHA WAN CATHOLIC SECONDARY SCHOOL

### Application Form for 2025-2026 S1 Waiting List

Applicant's Name (in English): \_\_\_\_\_  
Surname Other names

Applicant's Name (in Chinese, if any): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (dd/mm/yyyy)

I.D. Card No.: \_\_\_\_\_ Student Reference No.(STRN): \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M Religion: \_\_\_\_\_

Address: \_\_\_\_\_

Photo

Relationship	Name	Mobile Phone No.	Home Phone No.
Father			
Mother			
Guardian (if applicable)			
** Please state the contact priority	Father	Mother	Guardian

Name of the Primary School

(in English)

(in Chinese)

Name of the Allocated Secondary School

(in English)

(in Chinese)

Did you apply for the Discretionary Place of our school in January, 2025? ( ) Yes ( ) No

Reasons for applying for the S1 Waiting List of our school: \_\_\_\_\_

## Academic Results / Conduct

	Chin.	Eng.	Maths	Average (Mark/Grade) (if any)	Position in Class e.g. 8/35 (if any)	Position in Form e.g. 15/132 (if any)	Conduct
P.4 1 <sup>st</sup> Exam							
P.4 2 <sup>nd</sup> Exam							
P.4 3 <sup>rd</sup> Exam (if any)							
P.5 1 <sup>st</sup> Exam							
P.5 2 <sup>nd</sup> Exam							
P.5 3 <sup>rd</sup> Exam (if any)							
P.6 1 <sup>st</sup> Exam							
P.6 2 <sup>nd</sup> Exam							
P.6 3 <sup>rd</sup> Exam (if any)							

## Extra-curricular Activities

Nature	Item	Class (e.g. P6)	Year	Awards/ Name of the Event/ Details
International/ Regional Competitions	1			
	2			
	3			
Inter-school Competitions	1			
	2			
Intra-school Competitions	1			
	2			
Other Awards/ Services/ Activities/ Qualifications	1			
	2			
	3			
	4			

### Declaration

We hereby confirm that the information provided herein is accurate, correct and complete and that the documents submitted along with this application form are genuine. We also acknowledge that we have read the notes of "S1 Places on Waiting List Application" carefully.

Date: \_\_\_\_\_ Applicant's (Student's) Signature: \_\_\_\_\_

Parent's/ Guardian's Signature: \_\_\_\_\_ (Name of Parent : \_\_\_\_\_)

\* This application form and required documents should be submitted by the applicant in person to our school office in the following timeslots: 8<sup>th</sup> July, 2025 (9:00 am – 12:30 pm, 1:30 pm – 4:00 pm)

Address: 533 Fuk Wing Street, Cheung Sha Wan, Kowloon Website: <http://www.cswcss.edu.hk> Tel. no.:27415034 Fax:27444810