

**ST. PAUL'S COLLEGE PRIMARY SCHOOL**

Junior Class : \_\_\_\_\_ Class No. : \_\_\_\_\_

Name : \_\_\_\_\_ (English) \_\_\_\_\_ (Chinese) Age : \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Place of Birth : \_\_\_\_\_

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

\_\_\_\_\_ Telephone No. : \_\_\_\_\_

Name of Father : \_\_\_\_\_ (English) \_\_\_\_\_ (Chinese)

Name of Company / Organisation : \_\_\_\_\_

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

\_\_\_\_\_ Occupation / Rank : \_\_\_\_\_

Telephone No.: \_\_\_\_\_ (Office) \_\_\_\_\_ (Mobile)

Name of Mother : \_\_\_\_\_ (English) \_\_\_\_\_ (Chinese)

Name of Company / Organisation : \_\_\_\_\_

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

\_\_\_\_\_ Occupation / Rank : \_\_\_\_\_

Telephone No. : \_\_\_\_\_ (Office) \_\_\_\_\_ (Mobile)

Is the student allergic to any medicine / chemical? Yes / No

If yes, please specify : \_\_\_\_\_

State any information you consider relevant concerning the student's medical condition.

\_\_\_\_\_  
\_\_\_\_\_

Person to contact when the parents cannot be reached.

Name : \_\_\_\_\_ (English) \_\_\_\_\_ (Chinese)

Relationship with the student : \_\_\_\_\_

Contact telephone No. : \_\_\_\_\_