

会馆会员 SHHK Member
Year Joined _____

属校教职员 Staff of Affiliated School
学校 School: _____ Year Joined _____

会馆与附属机构职员 Affiliated Entities Staff
机构 Entity: _____ Year Joined _____

请参阅申请须知。 Please refer to the notes to applicants.
请以英文大写字母填写，并在相关的格子内打勾。 Please write in BLOCK letters and tick where applicable.

申请组别 Category Applying For	
<input type="checkbox"/> 小学组 Primary	<input type="checkbox"/> 中学组 Secondary <input type="checkbox"/> 高中组-工艺学院 ITE
申请需附上以下文件的核证真实副本 Photocopies of the following documents must be certified true copies and submitted together with the application:	
<input type="checkbox"/> 父母亲身份证 NRIC of Parents	<input type="checkbox"/> 子女出生/身份证 Birth Cert/NRIC of Child <input type="checkbox"/> 子女学业成绩单 Child's Result Slip
<input type="checkbox"/> 电话/水电费单 Phone/Utilities Bill	<input type="checkbox"/> 收入证明 Income Proof (公积金/薪金单/税务缴交记录/其他 CPF/Pay-Slip/Tax Return/Letter of Declaration)

PARTICULARS & OTHER GENERAL INFORMATION

会员/属校教职员/秘书处职员资料 Particulars of Member/Staff of Affiliated School/Secretariat Staff (Applicant)			
Name <input type="checkbox"/> Dr <input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mdm		中文姓名	身份证号码 NRIC No. <input type="checkbox"/> Pink <input type="checkbox"/> Blue
出生日期 Date of Birth 日 day 月 month 年 year	年龄 Age	国籍 Nationality	电邮 Email
联络号码 Contact (手机HP) _____ (住家Home) _____ (办公室Office) _____			
地址 Address _____ S'pore ()		产业拥有权 Property Ownership	
<input type="checkbox"/> 政府组屋 HDB : <input type="checkbox"/> 1-rm <input type="checkbox"/> 2-rm <input type="checkbox"/> 3-rm <input type="checkbox"/> 4-rm <input type="checkbox"/> 5-rm <input type="checkbox"/> E-Flat		<input type="checkbox"/> 购买 Purchased	
<input type="checkbox"/> 私人产业 Pte Property : <input type="checkbox"/> 公寓 Condominium <input type="checkbox"/> 有地住宅 Landed <input type="checkbox"/> 其他 Others (pls specify) _____		<input type="checkbox"/> 租用 Rental	
		<input type="checkbox"/> 其他 Others (pls specify) _____	

申请学生资料 Child's Information			
Name (Please provide us with the name as per bank's records)		中文姓名	性别 Gender <input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female
出生日期 Date of Birth 日 day 月 month 年 year	年龄 Age	出生/身份证号码 BC/NRIC No.	国籍 Nationality
就读学校 School Attending		年级 Standard	操行 Conduct

学业成绩 Academic Results (请提供学业成绩单 Please provide result slip)			
科目 Subjects	成绩 Results	科目 Subjects	成绩 Results
1.		7.	
2.		8.	
3.		9.	
4.		10.	
5.		11.	
6.		12.	

FINANCIAL INFORMATION & OTHER DECLARATIONS

所有同住家庭成员资料 Particulars of Family Members Living At The Same Address

总家庭人数 Total number of family members _____

成员 Members	姓名 Name	年龄 Age	职业 Occupation <small>(If deceased or divorced, please indicate accordingly) (If student, pls state school and level)</small>	每月收入 Gross Income <small>(If no income pls indicate 0)</small>
父亲 Father				S\$
母亲 Mother				S\$
孩子 Child 1				S\$
孩子 Child 2				S\$
孩子 Child 3				S\$
孩子 Child 4				S\$
其他成员 Other Members				S\$
				S\$
				S\$
每月总收入 Total Monthly Gross Income				S\$

其他家庭经济情况 Other Financial Information of Family

无其他收入 No other source of income
 赡养费 Maintenance Fees 每月S\$ _____ /mth
 无固定收入 No stable income 每月S\$ _____ /mth
 租金收入 Rental Income 每月S\$ _____ /mth
 其他 Other Income 每月S\$ _____ /mth 来源Source _____

其他助学金/经济援助资料 Information on other Bursaries or Financial assistance received

无其他助学金/经济援助 No other form of assistance
 福建基金经济援助 Assistance from THF 年Year _____ 数额Amount S\$ _____
 其他助学金/经济援助详情如下 Other Bursary/Financial Assistance as follow:
 _____ (机构 Organization) _____ (年度 Year) S\$ _____ (金额 Amount)
 _____ (机构 Organization) _____ (年度 Year) S\$ _____ (金额 Amount)

就读学校校长/系主任/部门主任之推荐 Recommendation from School Principal/Dean/HOD

_____ 姓名/签名/日期 Name/Signature/Date & School's Stamp

申请者声明 Declaration by Applicant

本人谨此声明，上述所填各项皆正确无误。

I _____ (name) declare that all information provided above is true and correct.
 I agree to be bound by the terms and conditions stated herein.

_____ 签名/日期 Signature/Date

本基金专用 For Official Use Only

Date Received : _____ Documents Checked and Verified by : _____

助学金 Bursary 2024

申请须知

- 1 凡本会馆会员、秘书处及属教职员子女，只要会籍或服务期满一年者，皆可提出申请。申请者须附上有关家庭经济状况的证明文件。
- 2 所有申请表皆须由所属学校校长/系主任/部门主任推荐方为助学金审核委员会接受。
- 3 申请者的家庭人均收入每月不超过\$800。
- 4 学生的平均学业成绩须在50分以上，操行至少乙等。
- 5 每个家庭不得超过两个申请者。
- 6 本助学金共分3组：
小学组 - \$550，中学组 - \$750，高中组(工艺学院) - \$1,000
- 7 本助学金每年颁发一次，有需要者，翌年可继续申请。
- 8 本助学金今年度的申请日期截至**2024年6月30日**。逾期者不受处理。
- 9 本基金可拒绝接受任何申请而无须说明理由。获得助学金者，若被发现填报不实，或因违反校规而被处分，其助学金将被取消。

Notes to Applicants

- 1 Applications are opened to children of members, secretariat and affiliated schools' staff. The member or staff concerned should have at least one year of membership or service with the Huay Kuan and/or its affiliated schools. The applicant should submit all supporting documents together with the application.
 - 2 Only applicants with the recommendation from his/her school Principal/Dean/HOD will be considered.
 - 3 The per capita household income should not exceed \$800 per month.
 - 4 All applicants should attain an overall average result of at least 50% in respect of his/her academic work and at least a Grade B for conduct.
 - 5 Applications are limited to only two per family.
 - 6 This bursary comprises 3 sections:
Primary - \$550; Secondary - \$750; ITE - \$1,000
 - 7 Each bursary is granted on a year to year basis. Applicants can apply again in the following year if require.
 - 8 The closing date for the application this year is **30 June 2024**. Late applications will not be considered.
 - 9 The Selection Committee shall have the right to reject any applications without providing any reasons. The bursary will be forfeited in the event any information provided herein is untrue or the applicant is subject to any disciplinary action.
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PERSONAL DATA PROTECTION ACT
CONSENT FORM

- 1 In compliance with the Personal Data Protection Act ("PDPA"), The Hokkien Foundation ("THF") seeks your consent to collect and use your personal data (i.e. Name, NRIC, contact numbers, mailing and email addresses) in order to assess the eligibility of your application for the above stated award and to disclose such personal data to THF's affiliated organisations where necessary ("Purposes").
- 2 THF will also collect and use your personal data to provide you with information on future award and activities such as upcoming events and programmes organised by THF and its affiliated organisations which may be relevant to you ("Services").
- 3 THF respects your privacy and assures that your personal data will be kept securely according to PDPA.
- 4 I hereby give my acknowledgement and consent to THF to use my personal data for the aforesaid Purposes and Services. In the event that I have registered my Singapore telephone numbers(s) with the Do Not Call Registry and wish to withhold or withdraw my consent to THF in respect of receiving telephone calls and/or SMS, I endeavour to provide sufficient notice to THF of such as soon as reasonably practicable. I further agree to indemnify THF against any financial penalties imposed by the Personal Data Protection Commission or any court of law in Singapore as a direct or indirect result of my failure to inform THF of my registration with the Do Not Call Registry.
- 5 I agree that my consent will remain in place until my withdrawal by officially notifying THF in writing at admin@shhk.com.sg.

Name: _____

NRIC number: _____

Mobile number: _____

Email: _____

Signature: _____

Date: _____