

香港特別行政區政府入境事務處
Immigration Department, the Government of
the Hong Kong Special Administrative Region
來港就讀(保證人)申請表 (由保證人填寫)
Application for Entry for Study (Sponsor)
in Hong Kong (to be completed by the sponsor)



此欄由辦理機關處理
FOR OFFICIAL USE ONLY

檔案條碼 Reference barcode

- 注意：(i) 有關申請手續及所需文件，請參閱「來港就讀入境指南」[ID(C) 996]。
Note: Please read the 'Guidebook for Entry for Study in Hong Kong' [ID(E) 996] for the application procedures and documents required for the application.
- (ii) 領取本表格無須繳費。 This form is issued free of charge.
(iii) 請用黑色或藍色筆以正楷填寫本表格。 Please complete this form in BLOCK letters using black or blue pen.
(iv) 請在適當方格內填上「✓」號。 Please tick as appropriate.
(v) * 請將不適用者刪去。 Please delete where inappropriate.

1. 在港保證人的資料 [請選擇以下第(i)或(ii)項] Particulars of Sponsor in Hong Kong [Please select item (i) or (ii) below]

(i) 適用於以學校作為保證人的申請 For application in which the sponsor is a school

學校名稱 Name of the school XXXXXXXXXXXXXXXXXXXX	
獲授權人士／聯絡人 Authorised person/Contact person XXXXXXXXXXXXXXXXXXXX	
職位 Post title XXXXXXXXXXXXXXXXXXXX	學校地址 (請在界內填寫) School address (please fill in within border) XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX
聯絡電話號碼 Contact telephone no. X X X X X X X X 內線 Ext. X X X X	
傳真號碼 Fax no. X X X X X X X X	
電郵地址 (如有) E-mail address (if any)	

(只適用於來港修讀專上或以上程度課程的申請) (only for applications for entry to take up post-secondary or above level programmes)

申請人在修讀課程後將獲頒授的學歷及頒授院校的名稱 Qualification to be awarded to the applicant upon completion of course and name of awarding educational institution XXXXXXXXXXXXXXXXXXXXXXXXXXXX	修讀模式 Mode of attendance <input checked="" type="checkbox"/> 全日制 Full-time <input type="checkbox"/> 兼讀制 Part-time
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(ii) 適用於以個人名義作為保證人的申請 For application in which the sponsor is an individual

姓名 (中文) (如適用) Name in Chinese (if applicable)	香港身份證號碼 (如有) HK identity card no. (if any) () ()
姓 (英文) Surname in English	
名 (英文) Given names in English	
出生日期 Date of birth 日 dd 月 mm 年 yyyy	性別 Sex <input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female
職業 Occupation	國籍／原居地 (適用於內地、香港、澳門及台灣居民) Nationality/Place of domicile (applicable to Mainland, Hong Kong, Macao and Taiwan residents)
聯絡電話號碼 Contact telephone no.	通訊地址 (請在界內填寫) Correspondence address (please fill in within border)
傳真號碼 (如有) Fax no. (if any)	
*每月入息／存款 (港幣) *Monthly income/deposit (HK\$)	與申請人的關係 Relationship with applicant
電郵地址 (如有) E-mail address (if any)	

如本表格為影印本或從互聯網下載，請填寫此欄。
Please complete this column if this form is a photocopy or downloaded copy.

在本頁內所填報的資料均屬正確、完備和真實。
The information given on this page is correct, complete and true.

保證人或學校的獲授權人士
姓名和簽署及學校蓋章 (註)
Name & signature of sponsor or school's authorised person and school chop (Note) SCHOOL AUTHORISED SIGNATORY NAME, SIGN AND SCHOOL CHOP HERE

日期 XX/XX/XXXX 職位 (如適用)
Date Post title (if applicable) JOB POSITION OF SIGNER

注：如保證人為一間學校，可授權一名人士代表學校簽署。在此情況下，獲授權人士應在簽署旁加蓋學校印章。
Note: If the sponsor is a school, an authorised person may sign on behalf of the school. In such case, the school chop should be endorsed beside the signature.

2. 學生（申請人） Student (applicant)

中文姓名（如適用）
Chinese name (if applicable)

英文姓名
English name XXXXXXXXXXXXXXXXXXXXXXXX

**3. 保證人的陳述說明及聲明（如保證人為學校，由獲授權人士作出陳述說明及聲明）
Sponsor's Statement and Declaration (To be made and declared by an authorised person if the sponsor is a school)**

本人同意為處理本申請個案而進行任何所需的查詢。
I consent to the making of any enquiries necessary for the processing of this application.

本人同意可將此申請表內各項資料提供予各政府部門（包括稅務局）及其他在香港特別行政區境內或境外的公、私營機構（包括強制性公積金計劃管理局）以作核對用途。
I consent to the use/disclosure of any information herein by/to any government bureaux, departments (including the Inland Revenue Department) and any other public or private organisations inside or outside the Hong Kong Special Administrative Region (including the Mandatory Provident Fund Schemes Authority) for verification purposes.

本人承諾倘申請人在入境事務處處長所批准的逗留期限屆滿時仍未離港，本人願意承擔責任，將申請人遣返（填上原居地）_____。

I undertake to assume responsibility for the applicant's repatriation to (place of domicile) _____ if at the expiry of limit of stay granted by the Director of Immigration, the applicant fails to leave Hong Kong.

本人明白，申請人須在轉換到本港任何院校就讀之前，事先取得入境事務處處長的批准。
I understand that the applicant should seek approval from the Director of Immigration prior to his/her transfer to other educational institution in Hong Kong.

本人承諾，在申請人完成課程前不再在本港就讀時，本人會通知入境事務處處長。
I undertake to notify the Director of Immigration of the cessation in the applicant's study before the completion of such study course in Hong Kong.

本人聲明就本人所知所信，在本申請表內所填報的各項資料均屬正確、完備和真實。
I declare that all information given in this application form is correct, complete and true to the best of my knowledge and belief.

保證人或學校的獲授權人士
姓名和簽署及學校蓋章（註）
Name & signature of sponsor or school's authorised person and school chop (Note)

SCHOOL AUTHORISED SIGNATORY
NAME, SIGN AND SCHOOL CHOP HERE

日期
Date XX/XX/XXXX

職位（如適用）
Post title (if applicable) JOB POSITION OF SIGNER

註：如保證人為一間學校，可授權一名人士代表學校簽署。在此情況下，獲授權人士應在簽署旁加蓋學校印章。
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