



香港資優教育學院 The Hong Kong Academy for Gifted Education

Mathematics Programme IMO Training 2010-11 (Phase II) (September to December 2010)

APPLICATION FORM

TO: The HKAGE – SPS,
Rm E326, East Block,
Kowloon Tong Education Services Centre,
19 Suffolk Road, Kowloon Tong

Please submit the completed application form to the HKAGE by fax or mail on or before Thursday, 9 Sep 2010.

(Fax no: 2490 4730)

I apply for the captioned course.

(Please indicate your preference below (1: more preferable、2: preferable). Applicants must fulfill the course pre-requisite.)

Level I

Level II

Personal particulars:

Student name (Chi): _____ Student name (Eng): _____

Student No: * 0 _____ / G _____ / IMO Prelim 2010 (*Please delete as appropriate.)

Contact Email: _____

Sex: M / F Study Level: _____ Contact No: _____

**Domain Mathematics Leadership Humanities Sciences

Year of attendance 'IMO Training'

Year: _____ ** Phase I Phase II Phase III

Year: _____ ** Phase I Phase II Phase III

** Attained merit in 'IMO Preliminary Selection Contest – HK 2010'

Gold Silver Bronze Qualification of training

(**Please ✓ as appropriate.)

- Notes:
1. Student applicants must get parents' approval and signature in applying for the activity.
 2. Name list of successful applicants of the programme will be posted to the website www.hkage.org.hk/ on **Tuesday, 14 September 2010**. Thus students should check at the above website on the day. No further notification will be sent.
 3. In the event of public announcement by the Education Bureau that all schools are to be closed as a result of adverse weather conditions (e.g. tropical cyclone or rainstorm), the course scheduled on that day will be cancelled or postponed.
 4. The HKAGE and the activity organisers will do their utmost to ensure the safety of the student participants during the activities. Nevertheless, parents have the responsibility to decide whether the programme fits their children according to the situation of their children and the nature of the programme, and bear all the consequences.
 5. The activity may be videotaped and photo-taken for the research and record purpose of the HKAGE.

Parents' Name: _____

Parents' Signature: _____

Parents' Phone No: _____

Date: _____