

**2018 ~ 2019 Application Form for Student Posts**

Name: \_\_\_\_\_ (Eng) \_\_\_\_\_ (Chi) Class: \_\_\_\_\_ (17-18) Class No: \_\_\_\_\_

**I. Personal information (\* Attach a copy of your 2<sup>nd</sup> term report card)**

17-18 Academic Performance	Conduct Grade	Major Posts and Services (in the past 3 years)
1. Best 2 Subjects in Form: a. _____ b. _____	16-17 ( )	1. Year _____ Post _____ 2. Year _____ Post _____ 3. Year _____ Post _____
2. Subjects failed:	17-18 ( )	
3. Overall average mark: ( )		
Award (✓):	2017-2018	
a. Award of Excellence ( ) b. Award of Diligence ( )	No. of merit: ( ) No of demerit: ( )	

**II. Self Evaluation**

1. You have a good relationship with others.  
(Please ✓ the suitable rating; 1: strongly disagree; 6: strongly agree)

6	5	4	3	2	1

2. Please list 3 strengths and 3 weaknesses of yours :

**Strengths**

**Weaknesses**

- |             |             |
|-------------|-------------|
| (i) _____   | (i) _____   |
| (ii) _____  | (ii) _____  |
| (iii) _____ | (iii) _____ |

**III. Preferences and Reasons for the choices**

\*Please specify your choices and state your reasons for application clearly.  
(Note : Make sure your first choice suits your ability and interest after careful consideration.  
If your first choice fails, there will be no assurance for your second or third choices.)

Choice of preference 1 being the first choice, 2 second, 3 third, (At least 2 but no more than 3 choices among A to E)	Reasons for application for the target post (be clear and precise)
<p><b>A. Student Leader Teams:</b>  <input type="checkbox"/> Prefect  <input type="checkbox"/> Student Union Executive  <input type="checkbox"/> Christian Ambassador  <input type="checkbox"/> House Executive  <input type="checkbox"/> Health Ambassador</p> <p><b>B. School Service Teams:</b>  <input type="checkbox"/> Librarian  <input type="checkbox"/> Student Ambassador  <input type="checkbox"/> Student Reporter  <input type="checkbox"/> Sports Association  <input type="checkbox"/> WoW Production</p> <p><b>C. Class Service Teams:</b>  <input type="checkbox"/> Monitor/Monitress  <input type="checkbox"/> Class Association Executive</p> <p><b>D. Committee of ECA:</b> please specify  <input type="checkbox"/> _____</p> <p><b>E. Committee of School Teams:</b> please specify  <input type="checkbox"/> _____</p>	<p>* 1. Return of this application form:                      S.1-2(optional);                      S.3-4(compulsory) <b>(Nil return is required).</b></p> <p>2. Completed form should be returned to school office by <b>16.7.2018 (Monday)</b>, the old students' registration day.</p> <p>***For enquiries please contact Ms. Yu Suk Yin.</p>