

沙田崇真中學
數學輔導班

本校為加強學生之數學能力，並解決其在學習上之疑難，特舉辦初中數學輔導班，詳情如下：

中二數學輔導班 (第二期)

上課日期： 18/2, 25/2, 4/3, 11/3, 29/4, 6/5, 20/5, 27/5 (共 8 堂)

時 間： 週一 下午 4:10 – 5:40

上課地點： 沙田崇真中學

名 額： 約 15-20 人(數學科名次較後者優先取錄，校方於 12/2 透過 eClass 手機應用程式家長版通知獲取錄的學生的家長)

導 師： 校外導師

費 用： 283 元(包括導師、講義及習作費用)

若學生出席率達 80%，學校將會津貼港幣\$84；若學生出席少於 80%，學校則不作任何津貼，屆時校方會通知家長繳付餘下費用。第一期費用港幣**\$199**將於 **10/03/2019** 從繳費靈戶口中扣除。已獲豁免以現金或支票繳付者，請於 15/02/2019 把費用交予何仲華老師。如有經濟困難，可向校方申請資助，詳情可向何仲華老師查詢。

請於 28/01/2019 或以前回覆。若 台端經提示後仍沒有回覆，校方視 貴子弟不參加有關課程，敬祈留意。

以上通告

中二家長



沙田崇真中學校長

梁潔妍

二零一九年一月二十五日

回條 (1819/035(M)b)

敬覆者：有關 貴校通告內容，敬悉。本人*同意 / 不同意 *小兒 / 小女 參加「中二數學輔導班(第二期)」。

此覆

沙田崇真中學梁校長

家長簽署：_____

學生姓名：_____

班 別：_____

學 號：_____

二零一九年 月 日

* 請刪去不適用者。

NOTICE TO PARENTS

From: Ms. LEUNG Kit Yin, Principal
 Date: 25th January, 2019
 Re: S.2 Mathematics Remedial Class

In order to strengthen students' ability in learning Mathematics, junior form remedial classes will be organized. Details are as follows:

S.2 Mathematics Remedial Class (Phase 2)

Dates: 18/2, 25/2, 4/3, 11/3, 29/4, 6/5, 20/5, 27/5 (8 lessons)
 Time: 4:10 p.m. - 5:40 p.m. (Mondays)
 Place: School
 Capacity: About 15 –20 persons (Priority will be given to those with lower Mathematics positions. Parents of shortlisted students will be informed through the eClass Parent App on 12/2.)
 Tutor: External tutor
 Fees: \$283 (including fees for tutor, teaching notes and exercises)
 Students whose attendance rate reaches 80% are entitled to a school subsidy of \$84. Failing that, they will not be subsidized and they have to pay the remaining fee upon school's notification. The first payment of **\$199** will be withdrawn from the PPS account on **10/03/2019**. Those who have been exempted have to submit the cheque or cash to Mr. Ho Chung Wa on 15/02/2019.

Please reply on or before 28/01/2019. If parents do not reply after being reminded, their wards will be considered as not joining the course.

REPLY SLIP (1819/035(M)b)

To: Ms. LEUNG Kit Yin, Principal
 Date:

I am aware of the information in your Notice to Parents. I * agree / do not agree that my ward should join the S.2 Mathematics Remedial Class (Phase 2).

Parent's Signature: _____

Student's Name: _____

Class: _____

Student No.: _____

* Please delete where inappropriate.