



ST. FRANCIS XAVIER'S COLLEGE

45, Sycamore Street, Taikoktsui, Kowloon, Hong Kong.

Tel.: (852) 2393-2271 Fax.: (852) 2391-6101

http://www.sfxc.edu.hk

本校檔案：20200923a

敬啟者：

新學年已開展，為確保 貴子弟在安全的學習環境下學有所長，敬請 台端細閱以下各項：

一、天氣惡劣下的停課安排

每遇惡劣天氣而在上課間接到教育局的停課通知，本校會在安全情況下，安排所有學生回到所屬課室，讓教師點名。點名後，本校會先讓中四級及以上學生自行離校回家。至於中一至中三級學生，本校會先讓已得到家長書面同意者自行離去，然後再安排其餘學生分批致電徵詢家長指示或聽候家長接回。如學生未能聯絡家長或未有家長來校接回，本校會讓有關學生在課室等候，並安排老師負責照顧，直至所有學生安全離開為止。

為方便本校在緊急事故發生時，能遵照各位家長的指示，迅速安排學生離校回家，敬請 台端 填妥函附覆函，著子弟交回班主任處理為荷。

二、常測安排

除了學期考試外，定期測驗有助推動學生複習所學，溫故知新。就此，本校各級均設有常測制度。各科常測的細節及安排，班主任及科任老師將容後公布。常測成績表將於每月 15 日前派發。敬祈留意相關安排，並督促子弟勤加溫習以考取佳績。

三、「留堂班」安排

本校素來要求學生具備良好品格及認真學習。若學生因操行欠佳，或會被罰「留堂」懲處。當恢復全日面授課堂及一切課後教學與課外活動後，「留堂班」將於週四下午 3 時 30 分至 5 時正恢復運作。倘學生須出席留堂班，老師會在學生手冊內記錄有關事項，並由學生親自通知家長。若學生無故缺席留堂班，校方將予嚴懲。

四、繳交 2020-2021 年度各項費用

謹請 台端著子弟帶備現金或支票繳交本學年各項費用（支票抬頭：The IMC of St. Francis Xavier's College-A/C No.2），班主任將代為處理。若學生中途退學，本校會按比例（以月份計算）退回款項。倘 台端對上述安排有任何問題，請致電本校查詢（電話：2393 2271）。如有任何經濟困難，請與班主任聯絡。各級費用表列如下：

項目	中一	中二	中三	中四	中五	中六
堂費	\$100	\$100	\$100	\$390	\$390	\$390
家長教師會會費（如有多於一位子弟在本校就讀，只需繳付一次會費，即\$ 60，並由就讀最低年級的子弟繳交。）	\$ 60	\$ 60	\$ 60	\$ 60	\$ 60	\$ 60
電子學生證（只限全體中一及中四學生並重讀生）	\$15	\$15 (重讀生)	\$15 (重讀生)	\$15	\$15 (重讀生)	\$15 (重讀生)
影印費	\$150	\$150	\$150	\$150	\$150	\$150
學生手冊	\$ 10	\$ 10	\$ 10	\$ 10	\$ 10	\$ 10
專用文件套（中一重讀生不用購買。）	\$ 29	-	-	-	-	-
學生簿冊	\$ 66					
MySmartSTEAM 跨學科電子閱讀平台訂閱	\$ 45	\$ 45	-	-	-	-
英文電子報	\$ 98	\$ 24				
校園通訊 SchoolApp	\$14	\$14	\$14	\$14	\$14	\$14
總額：	\$587	1. \$403 2. \$418 (重讀生)	1. \$334 2. \$349 (重讀生)	\$639	1. \$624 2. \$639 (重讀生)	1. \$624 2. \$639 (重讀生)

五、學生健康調查

體育活動對子弟身心之均衡發展有莫大裨益，請鼓勵子弟積極參與，並囑咐其在參與體育活動時服從老師指導及遵守安全規則，避免意外發生。為使本校能清楚了解子弟之健康狀況，以提供適當的照顧，敬請填妥函附「學生健康調查表」，並著子弟親自交回班主任代為處理為荷。

六、「學生人身意外保險」

為了向學生提供公眾責任及團體人身意外保障，政府每年均會替所有資助學校投購綜合保險計劃。有見該計劃保障範圍有限，本校已為全體學生額外投購一份「學生人身意外保險」(Group Student Personal Accident)，以確保學生在校內，或參與由學校所舉辦／安排的任何活動遇上意外時，得到更全面保障。此項額外保險以本校基金投購，家長無須承擔任何費用，其保障項目包括：

保障項目	每次意外保障額(港幣)
1. 死亡	120,000 元
2. 永久完全殘障(例如喪失四肢、失聰、失明等)	100,000 元
3. 醫療費用	5,000 元(跌打及針灸醫療費用上限為 1,000 元)

七、攜帶及於校內使用手提電話規則

本校批准學生攜帶手提電話回校，目的是方便與家長聯絡。學生於校內使用手提電話，須嚴守以下規則：

1. 凡經由家長填妥覆函申請及獲校方批准的學生，方可攜帶手提電話回校。
2. 除午飯及放學後兩個時段，學生在校內不可開啟及使用手提電話。
3. 學生在校內使用手提電話只可作語音通訊。
4. 學生在校內應妥善保管手提電話。遺失手提電話將作一般失物處理。
5. 學生不可在校內替手提電話充電。
6. 學生如更換電話或電話號碼，必須向校方更新資料。
7. 學生如違反以上規則，校方會作出處分：
 - i. 違規者將被記三個罰分；校方會致電通知家長，並沒收保管手提電話至下一個上課日放學後才交還學生。
 - ii. 重犯者除記三個罰分及沒收手提電話外，校方會致電家長到校面談與領回手提電話。
 - iii. 再犯者除記一個缺點及沒收手提電話外，校方會致電家長到校面談、領回手提電話及禁止於該學年內攜帶手提電話回校。
8. 學生如於考試期間違反規則，如沒有把手提電話放在座椅下的當眼處，讓監考老師清楚看見；沒有關掉手提電話及其響鬧功能，導致手提電話在考試中途發出聲響，可被視為作弊。

倘校方接納攜帶手提電話的申請，請囑咐子弟嚴守上述規則，並小心保管手提電話。為方便本校統計有關資料，敬請 台端填妥函附覆函，著子弟交回班主任收集。

敬請細閱以上各項，並填妥函附覆函和「學生健康調查表」，著子弟連同本學年各項費用於 **9月28日** (星期一) 或以前交回班主任為荷。

此致
貴家長

聖芳濟書院校長
姚廣智啟

2020年9月23日

聖芳濟書院

【學生健康調查表】

(由家長 / 監護人填寫)

學生姓名 : _____ 家長/監護人姓名 : _____
班別及學號 : _____ () 聯絡電話 : _____
出生日期 : _____ 緊急聯絡電話 : _____

如學生曾出現以下情況，請在適當的方格內加 [✓] 記號：

		✓		✓		✓		
001	六磷酸葡萄糖脫氫酶素缺乏症		007	糖尿病		013	疫苗敏感	
002	哮喘		008	聽覺不健全		014	食物敏感	
003	羊癇		009	血友病		015	其他敏感	
004	高熱引致抽搐		010	貧血		016	肺結核	
005	腎病		011	其他血病		017	小手術	
006	心臟病		012	藥物敏感		018	大手術	

有關上述健康狀況的補充資料：

倘認為學生不適宜上體育課或參加任何其他類型的學校活動，請具體說明：

備註: 本校確保上述所有資料保密，以保障個人私隱。

日期

家長 / 監護人簽署

家長覆函

敬覆者：敬接來函第 20200923a 號，現謹作以下回覆（請在適用的方格加上✓號）：

一、中一級至中三級

本人已知悉 貴校在天氣惡劣下的停課安排。本人就教育局在上課期間宣布停課時安排小兒放學之選擇如下：

- 准許小兒自行離校回家。
- 當小兒與本人取得聯絡，得到指示後，便可自行回家。
- 不准許小兒自行回家，並須留校等候家人接回。

二、中四級至中六級

本人已知悉 貴校在天氣惡劣下的停課安排，並同意當教育局在上課期間宣布停課時，讓小兒自行離校回家。

三、本人已知悉 貴校有關常測的安排，並會督促小兒勤加溫習，以考獲良好成績。

四、本人已知悉 貴校有關「留堂班」的安排。

五、本人已知悉 貴校收取本學年各項費用的安排，並已著小兒隨函奉上 ** 現金 / 支票
(支票銀行：_____ 支票號碼：_____) 繳付有關費用。

六、本人會督促小兒在參與體育活動時，服從老師之指示及遵守安全規則。又本人已填妥函附之「學生健康調查表」，並著小兒親自將調查表隨函交回班主任。

七、本人已知悉 貴校為小兒額外投購「學生人身意外保險」及其保障項目。

八、本人已知悉 貴校就學生攜帶手提電話回校的安排。本人選擇如下：

- 不為小兒申請攜帶手提電話回校。
- 為小兒申請攜帶手提電話回校，並承諾督促小兒遵守使用規則。現填上小兒手提電話之資料供校方統計之用：

班別	班號	手提電話號碼	手提電話產品編號 (按*#06# 便可顯示)

此 覆

聖芳濟書院姚廣智校長

家長

_____ 覆

簽署日期：2020 年 月 日

學生姓名：_____ 班別：_____ 學號：_____

家長姓名：_____ 聯絡電話：_____

** 請刪去不適用者



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School File : 20200923a

Dear Parents :

For the safety and wellbeing of your son, please pay attention to the follow points in the beginning of a new school term.

1. Special Arrangement for Bad Weather

In case the school receives notice from EDB to suspend school activities due to extreme weather conditions, the school will make sure that all students will return to their classrooms and take a roll call. After that, students from F.4-6 will be allowed to leave school on their own. For F.1-F.3 students, those with parental consents to leave school independently will be allowed to go after the roll call. The rest will be arranged to contact their parents for instructions to either go home on their or wait for pickups. If these students are not able to contact their parents, they will be taken care of by teachers in their classrooms until it is safe for them to leave. To help the school dismiss your son according to your instructions under bad weather conditions, please complete the attached **Parent Return Note** and have your son submit it to his form teacher the next school day.

2. Regular Test Arrangement

Other than term examinations, regular test help students do revision regularly. For that reason, the school implemented the Regular Test (RT) system. Details of the subjects concerned will be announced later. The RT results for each month will be distributed through the monthly report on or before the 15th of the coming month. Please pay attention to the relevant arrangement and supervise your son's study in order to achieve good results.

3. Detention Arrangement

We have high expectations on students' characters and learning attitude, therefore misbehaviors can warrant detentions from teachers. When the after-school activities are fully resumed, the detention class will begin at 3:30 p.m. after school until 5 p.m. every Thursday. Students whom are sent to a detention class will be marked on their student handbooks and it will be the students' responsibilities to notify their parents. Ditching any detention classes will warrant further disciplinary actions from the school.

4. Various Payments for 2020-2021

Please instruct your son to bring back **cash or cheque** (Payable to: The IMC of St. Francis Xavier's College - A/C No. 2) to be collected by form teachers to pay for various costs in 2020-2021. If your son withdraws from our school during the year, we will refund your payment proportionately by the month. Please contact the school office at 23932271 if you have any questions regarding the payment arrangements. Should parents have any financial problems in the payment, please contact the Form Teacher.

Item	Form 1	Form 2	Form 3	Form 4	Form 5	Form 6
Tong Fai/General Fee	\$100	\$100	\$100	\$390	\$390	\$390
Parent Teacher Association Fee (only one payment of \$60 is charged if you have more than one child enrolled in our school; the younger son should be responsible for bringing back this payment)	\$60	\$60	\$60	\$60	\$60	\$60
e-student ID (only for F.1 and F.4 students, as well as all repeaters in F.2, 3, 5 & 6)	\$15	\$15 (repeaters)	\$15 (repeaters)	\$15	\$15 (repeaters)	\$15 (repeaters)
Photo-copying fee	\$150	\$150	\$150	\$150	\$150	\$150
Student Handbook	\$10	\$10	\$10	\$10	\$10	\$10
Designated Folders (waived for all F.1 repeaters)	\$ 29	---	---	---	---	---
Blank Exercise Books	\$ 66	---	---	---	---	---
MySmartSTEAM Subscription	\$ 45	\$45	---	---	---	---
English E-newspaper	\$ 98	\$24	---	---	---	---
SchoolApp Subscription	\$ 14	\$ 14	\$ 14	\$ 14	\$ 14	\$ 14
	Form 1	Form 2	Form 3	Form 4	Form 5	Form 6
Total :	<u>\$587</u>	1. <u>\$403</u> 2. <u>\$418</u> (repeaters)	1. <u>\$334</u> 2. <u>\$349</u> (repeaters)	<u>\$639</u>	1. <u>\$624</u> 2. <u>\$639</u> (repeaters)	1. <u>\$624</u> 2. <u>\$639</u> (repeaters)

5. Student Health and Learning Conditions Survey

Physical activities are healthy for the physical and mental development of students. So please encourage your son to participate in them and remind them to obey all instructions to avoid injuries. To facilitate the school's understanding and the provision of adequate supports to your son's health and learning conditions, please the attached **Student Health Survey** and instruct your son to submit it **personally** to his form teacher.

6. "Group Student Personal Accident" Coverage

Each year, the government buys a comprehensive protection insurance plan for all aided schools. But due to its limited coverage, the school will buy the "Group Student Personal Accident" insurance to provide extra protection for accidents happened inside school premises and during school-arranged activities. The cost of this insurance plan is completely covered by the school's own funding and will not charge you anything. The coverage includes the following details:

Insured Events	Benefit per Accident (HKD)
1. Death	\$120,000
2. Permanent total disablement (loss of limbs, sight, hearing, etc.)	\$100,000
3. Medical Cost	\$5,000 (Claim Ceiling for Chinese Bonesetter and Acupuncture Treatment is \$1,000)

7. Rules for Using Mobile Phones in School

Students are allowed to bring mobile phones to school for the sole purpose of facilitating communications between students and their parents. Any students who bring mobile phones to school are to strictly observe the following rules:

1. Only those applied in **Item 8 of the Parent Return Note** are allowed to use mobile phones in school.
2. Students are not allowed to turn on or use their mobile phones inside school other than the time before morning assembly, during lunch or after school.
3. Students can only use the voice call function of their phones when they are within school premises.
4. Students should keep their phones safe. Loss of mobile phones will be treated as regular loss of property.
5. Using school facilities to charge smart devices are strictly prohibited.
6. The school must be notified if the student changes to a new mobile phone and/or its number.
7. Students violating any rules mentioned above will be subject to disciplinary actions:
 - a. Students who use their mobile devices improperly will receive 3 Black Marks. Their parents will be notified and their phones confiscated until the end of the next school day.
 - b. Students who repeat the same offense will receive 3 Black Marks and have their phones confiscated. Their parents will be invited for an interview. The confiscated phones will only be returned to the visiting parents.
 - c. Students who repeat the same offense for the 3rd time will receive 1 Black Point, have phones confiscated, parents invited for an interview and to claim the phones. In addition, they will not be allowed to bring phones to school anymore for the rest of the school year.
8. If students do not follow the instructions given by invigilators during exams (eg. not leaving the phones under the chairs in plain sight; not turning off the phones so they make any noise during the exam) will be treated as cheating. Should the school accept your application to bring phones to school, please remind your son the above school rules on mobile usage on campus and keep his phones safe.

Please read all the above items carefully and complete the attached **Parent Return Note** and **Student Health Survey**. Have your son bring back both completed documents together with payments for various fees on or before 26th September (Fri). Thank you for your attention.

Best regards,

IU Kwong Chi
Principal

Parents Return Note

With Reference to Parent Letter documented 20200923a, I hereby make the follow reply (please ✓ the appropriate boxes) :

1. Adverse Weather Arrangement (for F.1 – 3 parents):

I am informed of the school dismiss arrangement during extreme weather conditions. When the EDB announces the suspension of school activities, please arrange my son to:

- leave school for home on his own.
- get in touch with me and leave school on his own after receiving my instruction.
- stay at school waiting for pickups.

2. Adverse Weather Arrangement (for F.4 – 5 parents):

I am informed of the school dismiss arrangement during extreme weather conditions. I consent that when the EDB announces the suspension of school activities, my son can be dismissed to go home by himself.

3. I am informed of the school’s regular test arrangement and will supervise my son to do revision accordingly.

4. I am informed of the school’s detention arrangement

5. I am informed of the school’s various fees for this coming school year and have instructed my son to bring school the cash / check (** cross out the inapplicable option) needed to pay for these fees.

(check issuing bank: _____ Check number: _____)

6. I will urge my son to obey all teacher instructions and safety regulations when participating in physical activities. I have completed the attached Student Health Survey and instructed my son to **personally** submit the survey to his form teacher.

7. I am informed of the school’s purchase of “Group Student Personal Accident” insurance plan and its coverage.

8. I am informed of the school’s rules for on campus mobile usage. My preference regarding my son’s mobile usage during school days will be:

- not allowing him to bring mobile devices to school.
- allowing him to bring mobile device to school but promised to urge him to observe the mobile usage regulations. Below is the information for the school’s record keeping purpose.

Class	Class No.	Mobile No.	Mobile Serial Number (press *#06# to display)

Regards,

Signature of parent: _____

Date: _____

Student Name : _____ Class & No. : () Student’s Contact No. : _____

Parent Name : _____ Parent’s Contact No. : _____

St. Francis Xavier's College

【Student Health Survey】

(To be completed by Parents / Guardians)

Student Name : _____

Name of Parent/Guardian : _____

Class (Class no.) : _____ ()

Contact Number : _____

Date of Birth : _____

Emergency Contact Number : _____

Put a [✓] in the appropriate boxes if your son has ever experienced any episodes of the following:

		✓			✓			✓
001	Glucose-6-phosphate dehydrogenase (G6PD) deficiency		007	Diabetes		013	Vaccine Allergy	
002	Asthma		008	Hearing Impairment		014	Food Allergy	
003	Epilepsy		009	Hemophilia		015	Other Allergies	
004	Febrile Convulsion		010	Anemia		016	Tuberculosis	
005	kidney Diseases		011	Other Blood related Diseases		017	Minor Operation	
006	Heart Attack		012	Drug Allergy		018	Major Operation	

Supplementary descriptions for the above health conditions:

Please state in details if you believe that your son is not suitable to participate in physical education lesson or any other school activities:

Remark: All information you provide here will be kept strictly confidential.

Date

Parent / Guardian Signature