

CAREERS PROGRAM 2025 APPLICATION FORM

Please return this application form via e-mail: info@arch-community-outreach.com

www.arch-community-outreach.com

INST	Κl	JC	HO	INS:

- Please complete all sections of the application form in English.
- Only completed and signed application forms will be processed.

<u>1. APPL</u>	ICANT INFORMATIO	<u>JN</u>		
Name (Last Name / First Name):		Chinese Name:		
Preferred Name: Date of Birth (MM/DD/		/YYYY):	Please attach photo	
Age:	Gender: □ Male □	Female Contact Number:		of Applicant
HKID Number: E-mail (Capital Letters):		:		
Home Add	ress:			
2 (110)	DENT SCHOOL INFO	DAMATION.		
Z. CURI	RENT SCHOOL INFO	RIVIATION		
Applicant	's School:			
School Ad	ldress:			

School Curriculum (i.e. HKDSE / IB)

Rank in Form (Position / Form Size):

Has the Applicant skipped or repeated a form during his/her schooling? ☐ Yes ☐ No

If yes, please explain:

Current Grade / Form:

Rank in Class (Position / Class Size):

3. PARENT/LEGAL GUARDIAN INFORMATION

Please complete all sections below and include legal guardian information if mother/father information is not applicable.

Parent / Legal Guardian 1

Parent/Legal Guardian 1: Mother Legal Guardian
Name (Last Name / First Name):
Contact Number:
Current Employer: Occupation and Position (Title):
Highest Level of Education: Primary Secondary University Other:
University (if any):
E-mail (Capital Letters):
Parent / Legal Guardian 2
Parent/Legal Guardian 1: Father Legal Guardian
Name (Last Name / First Name):
Contact Number:
Current Employer: Occupation and Position (Title):
Highest Level of Education: Primary Secondary University Other:
University (if any):
E-mail (Capital Letters):
Additional Family Details
Please indicate your household size: and indicate members whom the Applicant resides with: □ Both Parents □ Father □ Mother □ Other(s):
Please indicate the estimated monthly household income (including wages & commissions; fees received for services rendered; profits from business; rental income, etc.; and assistance provided by the Government allowances) of the Applicant: Government subsidy (HKD) Less than HKD 10,000 Between HKD 10,000 – 15,000 Between HKD 15,000 – 25,000 Between HKD 25,000 – 35,000 Above HKD 35,000 Is the Applicant's residence self-owned by family or rented? Self-owned Rented
Does the Applicant's family receive subsidy from government for housing? No

Does the Applicant's family rece		ny subsidy froi	m governn	nent? 🗆 Ye	s, HKD	_ □ No
□ Comprehensive Social Security Assistance (CSSA)						
☐ The School Textbook Assistance (TA) Scheme <☐ Full ☐ Half>☐ The Student Travel Subsidy (STS) Scheme						
☐ The Subsidy Scheme for Interr	•		(SIA)			
□ Other(s):			· ,			
Does the Applicant's family receive company allowance for housing? Yes, HKD No						
Please indicate the number of d	epen	dents in the A	pplicant's	family and	their respective age	S:
On average how often do you tr Please specify destinations you						
AA EVIDACIIDDICIII AD ACTIVIT	EC O	INITEDECTO				
4A. EXTRACURRICULAR ACTIVITI	<u>E3 &</u>	IINTERESTS				
Please list below, in order of imp	ortar	nce to you, yo	ur main ex	ktra-curricu	ular interests and ac	tivities. These may includ
but are not limited to academic						-
community service, employment	expe	riences, and n	nore. You	may also a	ttach an additional r	esume.
		V/-\ - f	Positio	on held		
Activity / Name of Organization	/ Name of Organization Year(s) of Participation		(e.g. Leader		Awards, achievements and/or recognition	
		/Participant)				
4B. COMMUNITY SERVICE						
Activity / Name of Organization		Year(s) of Participation		Type of Service/Role (e.g. Helping the Elderly/Homeless/Children/Environment)		

5. CAREER INTEREST(S)

Please indicate your potomore than one industry.	ential career interests and pref	ference for summer job shadowing. You may select
□ Natural Resource		□ Arts and Communications porate (Diversified industries) pod & Beverage □ Law □ Technology, Engineering and Science
	Preference for S	ummer Job Shadowing
Priority	Field of Interest (e.g. Legal / Medical)	Company / Organization (If Any) (e.g. A&O Shearman / HKSH Medical Group)
1st		
2nd		
3rd		
· ·	udying overseas if financial su used to allocate mentors. It will NOT	pport (e.g. grants, scholarship) is provided? affect your chance of admission.)
☐ Yes, country:	□ No	
Which subjects are you	interested in studying at unive	ersity? (You may indicate more than one subject):
upbringing, achievement interested in the Career are your future aspiration the Careers Program? As we already have your	s, please write an English essay its, interests, motivation, study is Program and what you expense ons? What do you plan to do we r academic record, this personal learn more about you as a pe	y that tells us more about yourself – your family, y goals, etc. Please share with us why you are ct to achieve by participating in the program. What with the experiences gleaned and lessons learned at all essay is intended NOT as a recitation of your grades erson and a student – and evaluate the level of your
Have you submitted you		isted applicant) for other career-focused mentoring ces? If so, please indicate your application(s),
	emy for Gifted Education 🗆 JA	ne HKU Academy for the Talented Mentorship Program Life Buddies Other(s), please specify:

8. REQUIRED DOCUMENTS

Please	include the following documents with your application:
	Personal Statement (per instructions above)
	Teacher's Recommendation Form and Letter, including required school transcript
	Photograph of Applicant (attach to page 1 of this application form)
	Family Financial Support Document(s) (If available)
We acco Boa info and com	ARATION The persons named below confirm that the information we have supplied in this application is urate to the best of our knowledge. We are fully aware that the ARCH Community Outreach Selection rd will rely on the accuracy of information provided by the Applicant. If any incorrect or inaccurate ermation is found, we understand that this application will be deemed void. We also acknowledge hereby give our consent that the given information be used by the ARCH Community Outreach's mittee members, industry partners, and other reviewers to further the Careers Program and other CH Community Outreach offerings.

Applicant's Signature	Parent / Legal Guardian's Signature
Name (IN PRINT)	Name (IN PRINT)
Date	