



Co-organised by the Law's Charitable Foundation and the Education Bureau  
**Applied Learning Scholarship (2018/19 School Year)**

*Notes on Nomination*

This Notes and the Nomination Forms in English are translated based on the Chinese version. For details of the Applied Learning (ApL) Scholarship, including the nomination criteria and related information, please refer to the Chinese version. The Chinese version shall prevail should there be any inconsistency.

1. Schools should use *Form H*, while Course Providers (CPs) should use *Form G* for nomination. Part I and Part II of Forms should be completed by respective nominators (i.e. either school or CP). Part III should be completed by the student nominees.
2. On top of the ApL Scholarship, all nominees will automatically enter for the nomination of "Special Awards". The Special Awards are to promote sharing of students' own learning experiences and stories, and the awards will be presented to those students with inspiring sharing.
3. Electronic copies of the nomination forms can be downloaded at the website of the Law's Charitable Foundation (LCF): [www.lawscharitable.org.hk](http://www.lawscharitable.org.hk).
4. Schools and CPs should submit the completed nomination form to the LCF in person or by mail. Besides, a duplicated copy of the nomination form should be sent to the LCF by fax or email in PDF or TIF format. Deadlines for submission are as follows (postmark date on the envelope will be regarded as the submission date):
  - 30 August 2019 (Friday) for CPs
  - 11 September 2019 (Wednesday) for schools
5. For any enquiries, please contact

The Law's Charitable Foundation (LCF)

Telephone : 3605 2081

Fax : 3020 6179

Email : [APL@lawscharitable.org.hk](mailto:APL@lawscharitable.org.hk)

Address : Office No. 2303, Saxon Tower, No. 7 Cheung Shun Street,  
Lai Chi Kok, Kowloon, Hong Kong

Website : [www.lawscharitable.org.hk](http://www.lawscharitable.org.hk)

Facebook : [www.facebook.com/lawscharitable](https://www.facebook.com/lawscharitable)



LCF Website



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**Applied Learning Scholarship (2018/19 School Year)**

Office Use	Date Received
Original	
e-Copy	

**Nomination Form G (To be completed by Course Provider)**

**Part I: Basic Information**

<b>Course Provider (CP)</b>	Name (Chinese):	
	Name (English):	
	Address:	
	Email Address:	Fax No.:
<b>Contact Person</b>	Name (Chinese):	Name (English):
	Title:	Tel. No.:
	Email Address:	

(Remark: All important notices and announcements will be sent to the CP contact person via emails. Please check the email-box provided above regularly and include "LCF" (APL@lawscharitable.org.hk) in your "approved sender list" and "address book" to receive the information on time and pass it to other related parties. All personal data collected shall only be used for the communications between you and the LCF, regarding any update about the Applied Learning Scholarship)

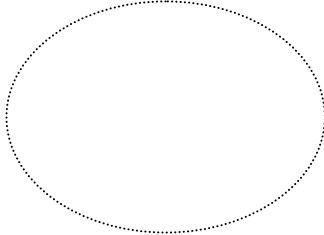
**List of Student Nominees:**

(Please submit a separate list for EACH ApL course and add extra pages if needed)

According to the number of S5 students enrolled in each ApL course in the 2018/19 school year, CPs can nominate one student at most for the scholarship for courses with 25 or less students while two students at most for courses with 26 to 50 students, and so on.

ApL Course:		Subject Code:
Name of Tutor:		
Number of S5 students enrolled in this ApL course in the 2018/19 school year: _____		
Number of students in this ApL course being nominated by our institution for the ApL Scholarship (2018/19 school year): _____		
<b>(1)</b>	Name of student nominee: <i>(Full name in block letters)</i>	Studying S5 in 2018/19? <input type="checkbox"/> Yes <input type="checkbox"/> No
	School:	
<b>(2)</b>	Name of student nominee: <i>(Full name in block letters)</i>	Studying S5 in 2018/19? <input type="checkbox"/> Yes <input type="checkbox"/> No
	School:	
<b>(3)</b>	Name of student nominee: <i>(Full name in block letters)</i>	Studying S5 in 2018/19? <input type="checkbox"/> Yes <input type="checkbox"/> No
	School:	

(Please ensure that all the above information is entered correctly.)

Signature of ApL Coordinator of CP:	CP Chop: 
Name of ApL Coordinator of CP:	
Date:	

## Part II: About the Nomination (To be completed by the nominator)

(Nominator could be a school principal, teacher, social worker, ApL coordinator or course tutor)

<b>Student Nominee</b>	Name of Student:		
	ApL Course:		
	Grade Attained in this Course:		
<b>Nominator</b>	Name of School/Course Provider:		
	Name (Chinese):		Name (English):
	Title:	Tel. No.:	Fax No.:
	Email Address:		

(All personal data collected shall only be used for the communications between you and the LCF, regarding any update about the Applied Learning Scholarship)

**How did you get to know the student nominee? How long have you known him/her?**

**What do you know about the student nominee (e.g. learning ability, inter-personal relationship, attitude and values towards life)?**

**What have you considered when you decided to nominate the student?**

Please tick (✓) the appropriate box(es) and/or provide supplementary information.

<input type="checkbox"/>	With outstanding achievements in the ApL course	Supplementary Information:
<input type="checkbox"/>	With talent and excellent performance in the course	
<input type="checkbox"/>	Diligent (e.g. attentive, punctual for classes, timely submission of assignments)	
<input type="checkbox"/>	With good learning attitude and active participation in the course	
<input type="checkbox"/>	With significant progress in overall learning and personal growth	
<input type="checkbox"/>	Good conduct (e.g. polite, responsible, willing to help)	
<input type="checkbox"/>	A good team player with positive influences on others	
<input type="checkbox"/>	Others (please specify, e.g. student's family circumstances)	

**What expectation(s) do you have on the student nominee?**

Please tick (✓) the appropriate box(es) and/or provide supplementary information.:

<input type="checkbox"/>	To continue studies in a relevant field of the ApL course	Supplementary Information/Words of Encouragement for the student nominee :
<input type="checkbox"/>	To develop a career in a relevant field of the ApL course	
<input type="checkbox"/>	To develop interest and expertise	
<input type="checkbox"/>	To achieve good results in the HKDSE Examination	
<input type="checkbox"/>	To fulfill his/her own dreams/goals	
<input type="checkbox"/>	To make good use of knowledge to contribute to society	

**Declaration: I hereby declare the information provided above is based on my best understanding on the student I nominated here.**

Signature of nominator:	Date:
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### Part III: Self-Description and Learning Experience (To be completed by the student nominee)

- Please express in words (Attach extra pages as needed, be sure to write your name and the name of your school on any extra pages that you attach).
- Please fill in ALL the blanks and elaborate details so that assessors could have a better understanding of your reflection, learning attitude and plan for development. All nominees will automatically enter for the nomination of Special Awards which will be presented to those students with inspiring sharing.
- Students with special educational needs (SEN) can be assisted by teachers or social workers when filling in this form. Different means of expressions would be accepted for students with SEN.

<b>Completed by:</b>	<input type="checkbox"/> <b>Student Nominee</b>	<input type="checkbox"/> <b>Nominator</b>	<input type="checkbox"/> <b>Others:</b> _____
<b>Student Nominee</b>	Name (Chinese):		Name (English):
	School:		
	Studying S5 in 2018/19?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
	Email Address:		Tel. No.:
	ApL course(s) enrolled in: (1) (2) <i>(if applicable)</i>		

(All personal data collected shall only be used for the communications between you and the LCF, regarding any update about the Applied Learning Scholarship)

(1) Please introduce yourself:
(2) Why do you think you are nominated for this scholarship?
(3) How would you use this scholarship, if awarded?
(4) Where do you see yourself in five years, in term of further studies and career development? How do you plan to get there?

(5) Describe a unique learning or life experience and how it has affected your personal growth and life goals. (Attach extra pages as needed)

(6) Summarize what you have learned or gained from ApL course(s), and reflect on what does the course mean to you. (Attach extra pages as needed)

You may have chances to fulfill your potential and demonstrate your learning achievement at the ApL Scholarship Presentation Ceremony if you are awarded. Should you be willing to showcase your talents and achievements on the day of the ceremony, please tick (✓) the box(es) below:

<p><b>1. Position at the ceremony:</b></p> <input type="checkbox"/> Emcee <input type="checkbox"/> Video Production <input type="checkbox"/> Photography <input type="checkbox"/> Personal Sharing on Stage <input type="checkbox"/> Souvenir Design and Production <input type="checkbox"/> Performance (Related to ApL Course): _____	<p><b>2. Calling for entries: Student Work Showcase</b></p> <input type="checkbox"/> Manuscript <input type="checkbox"/> Digital Art & Design <input type="checkbox"/> Handicraft <input type="checkbox"/> Drawing / Painting / Photo <input type="checkbox"/> Film / Video <input type="checkbox"/> Computer Game / Animation <input type="checkbox"/> Others (Related to ApL Course): _____
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**Remark: The above recruitment is purely voluntary, and will not affect the result of assessment.**

**Declaration:**

- I pledge to pursue excellence in my learning and endeavour to complete the ApL course(s).
- I understand and agree that all the information provided and shared above is voluntary. If I fail to provide sufficient information as requested, the LCF may not be able to process my nomination.
- I understand and agree that all personal sharing above might be used by the LCF in the pamphlets, publications or other promotional materials of the ApL Scholarship, if I am awarded.
- I hereby declare that all the above information is true. I understand that the application will be rejected if any information provided in the nomination form is untrue. The LCF reserves all rights to take any actions.

Signature of student nominee:	Date:
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**Enquiry about “ApL Scholarship”:**

Contact Person : Ms. Linda WOO  
 Contact Tel. No. : 3605 2081  
 Email : [APL@lawscharitable.org.hk](mailto:APL@lawscharitable.org.hk)



LCF Website



LCF Facebook

## **Personal Information Collection Statement**

1. The personal data collected in the nomination form will be used by the Law's Charitable Foundation (LCF) and the Education Bureau for the purpose of application, assessment and communication in relation to the Applied Learning Scholarship and its related activities. These personal data may be disclosed by the LCF to the third parties to complete the necessary procedures for the purposes mentioned above.
2. The provision of the personal data in this form is voluntary. Failure to provide these data, including name, name of school/course provider, email address and contact telephone number, may affect the processing and outcome of your application.
3. Under the Personal Data (Privacy) Ordinance, you have a right to request access to, and to request correction of, your personal data in relation to your application, including the right to obtain a copy of your personal data provided by this form.
4. For enquiries concerning the personal data collected in this form, please contact the Law's Charitable Foundation at 3605 2081 during office hours.