



Co-organised by the Law's Charitable Foundation and the Education Bureau
Applied Learning Scholarship (2021/22 School Year)

Notes on Nomination

Please refer to the Chinese version of the Notes on Nomination for details of the Applied Learning (ApL) Scholarship, including the nomination criteria and related information. A few key points are highlighted below for quick reference only. The Chinese version shall prevail should there be any inconsistency.

1. Schools and course providers (CPs) are both eligible to nominate students for the ApL Scholarship.
2. All student nominees should have studied ApL course(s) at Secondary 5 (S5) in the 2021/22 school year (s.y.), regardless of whether it was their first or the second year of study.
3. The nomination form consists of Form A1, Form A2 and Form B. Form A1/Form A2 should be completed by the nominator (school/CP). For Form B, Part I should be completed by the nominator and Part II should be completed by the student nominee.
4. In addition to the ApL Scholarship, all nominees will automatically be entered 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.
5. The softcopy of the nomination form is available for download on the website of the Law's Charitable Foundation (LCF): www.lawscharitable.org.hk
6. Schools and CPs should submit the original of the completed nomination forms to the LCF in person or by mail. In addition, a duplicate copy of the nomination form (in PDF or TIF format) should be sent to the LCF either by fax or by email. **The deadline for submitting the nomination forms are as follows** (postmark date on envelope will be regarded as the submission date).

–9 December 2022 (Friday) for CPs

–16 December 2022 (Friday) for schools

7. For enquiries, please contact the **Law's Charitable Foundation (LCF)** :

Telephone : 3605 2081

Fax : 3020 6179

Email : 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



LCF Website

Facebook : www.facebook.com/lawscharitable



LCF Facebook

YouTube : <https://www.youtube.com/channel/UCB5mfoPALdgrb3G8cFAleqA>



LCF YouTube



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Form A2 (Completed by Course Provider)

OFFICE USE	
Ref. no.	
Original	
E-copy	

Course Provider's Nomination Form

ApL course: _____ **Subject code:** _____

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

[Note: Please note that the LCF will send important notices to course providers via email. Contact persons of course providers are advised to make appropriate settings in the email accounts (e.g. Add the email address of the LCF (APL@lawscharitable.org.hk) in the "Approved Senders List" and "Address Book") to ensure timely receipt of relevant messages from the LCF.]

Total no. of S5 students enrolled in this ApL course in the 2021/22 s.y. =

No. of students being nominated by this course for ApL Scholarship (2021/22 s.y.) =

[Note: The maximum no. of student nominees is set according to the no. of S5 students enrolled in each ApL course in the 2021/22 school year. CP can nominate **1** student for ApL courses with **25 or fewer** students; up to **2** students for ApL courses with **26 to 50** students, and so on.]

List of Student Nominees:

[Note: Submit a separate list for EACH ApL course. Add extra pages if needed.] (Please ✓ as appropriate)

(1)	Full name of student: <i>(in block letters)</i>	Studying S5 in 2021/22 s.y. <input type="checkbox"/> yes <input type="checkbox"/> no
	School:	
(2)	Full name of student: <i>(in block letters)</i>	Studying S5 in 2021/22 s.y. <input type="checkbox"/> yes <input type="checkbox"/> no
	School:	
(3)	Full name of student: <i>(in block letters)</i>	Studying S5 in 2021/22 s.y. <input type="checkbox"/> yes <input type="checkbox"/> no
	School:	
(4)	Full name of student: <i>(in block letters)</i>	Studying S5 in 2021/22 s.y. <input type="checkbox"/> yes <input type="checkbox"/> no
	School:	

(5)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/22 s.y. <input type="checkbox"/> no
	School:	
(6)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/22 s.y. <input type="checkbox"/> no
	School:	
(7)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/22 s.y. <input type="checkbox"/> no
	School:	
(8)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/22 s.y. <input type="checkbox"/> no
	School:	
(9)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/22 s.y. <input type="checkbox"/> no
	School:	
(10)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/2 s.y. <input type="checkbox"/> no
	School:	
(11)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/22 s.y. <input type="checkbox"/> no
	School:	
(12)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/22 s.y. <input type="checkbox"/> no
	School:	
(13)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/22 s.y. <input type="checkbox"/> no
	School:	
(14)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/22 s.y. <input type="checkbox"/> no
	School:	
(15)	Full name of student: <i>(in block letters)</i>	Studying S5 in <input type="checkbox"/> yes 2021/22 s.y. <input type="checkbox"/> no
	School:	

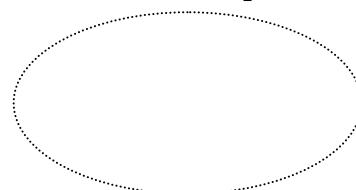
[Note: Please ensure all the above information is entered correctly.]

Signature of ApL Coordinator of CP:

Name of ApL Coordinator of CP:

Date:

Course Provider Chop:





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Form B

OFFICE USE

Ref. no.

Part I: Reasons for the Nomination (to be completed by the nominator)

[Note: Nominator can be a school principal, teacher, social worker, ApL coordinator or course tutor.]

Student Nominee	Name of student:	
	School:	
	ApL course:	
	Grade attained in this course: <i>(Please refer to the Learning Progress Report issued by the EDB in October 2022/ the feedback from the course provider(s))</i>	
Nominator	Name of school/course provider:	
	Name (Chinese):	Name (English):
	Title:	Tel. no.:
	Email address:	

[Note: All personal data collected shall only be used exclusively for processing the nominations by LCF and communication purpose.]

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

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

(3) What are your main considerations when you decided to nominate the student?

(Please tick (✓) the appropriate box(es) and provide supplementary information as needed.)

<input type="checkbox"/>	With outstanding achievements in the ApL course
<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)

Supplementary Information:

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

(Please tick (✓) the appropriate box(es) and provide supplementary information as needed.)

<input type="checkbox"/>	To continue studies in a relevant field of the ApL course
<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 fulfil his/her own dreams/goals
<input type="checkbox"/>	To make good use of knowledge to contribute to society

Supplementary Information / Words of Encouragement for the student nominee:

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

Signature of nominator:

Date:

Part II: Self-Description and Learning Experience (to be completed by the student nominee)

- Please express in words. Attach extra pages as needed and write your name and the name of your school on every page added.
- 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.

Completed by:	<input type="checkbox"/> Student Nominee <input type="checkbox"/> Nominator <input type="checkbox"/> Others: _____		
Student Nominee	Name (Chinese):	Name (English): (in block letters)	
	School:		
	Studying S5 in 2021/22 school year: <input type="checkbox"/> Yes <input type="checkbox"/> No	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	
	Email Address:	Tel. No.:	
	ApL course(s) enrolled: (1) _____ (2) _____		

[Note: All personal data collected shall only be used exclusively for processing the nominations by LCF and communication purpose.]

(1) Please introduce yourself.
(2) What do you think is the reason for being nominated?
(3) How would you use this scholarship, if awarded?

(4) What are your expectations for the next five years in studies or career development? How do you plan to meet these expectations?

(5) Please share your unique learning or life experience and how it affects your personal growth and life goals. *(Attach extra pages as needed)*

(6) Please summarise what you have gained from the ApL course, and briefly describe the meaning of the course for you. *(Attach extra pages as needed)*

You may have opportunities to fulfil your potential and demonstrate your learning achievement at the ApL Scholarship related events and activities, such as Presentation Ceremony or exhibitions if you are awarded. Should you be willing to showcase your talents and achievements, please tick (✓) the box(es) below:

1. Positions you are willing to take up:

- Emcee Video Production
- Personal Sharing
- Souvenir Design and Production
- Performance (Related to ApL Course):

2. Accomplishment or work you are willing to showcase:

- Manuscript Handicraft/Fashion/Jewellery
- Digital Design Drawing / Painting / Photo
- Film / Video Computer Game / Animation
- Others (Related to ApL Course):

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 if I fail to complete the ApL course(s) regardless of the cause, I shall be disqualified from nomination and award, and that I must return the amount of Scholarship in full and the certificate to the LCF.
- I understand and agree that all information provided 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 information provided 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 nomination 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:

Enquiry about “ApL Scholarship”:

Contact Tel. No. : 3605 2081

Email : APL@lawscharitable.org.hk



LCF Website



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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.