

Chiu Sheung School, Hong Kong 79B Pok Fu Lam Road, Hong Kong

Tel: 2546-1644 Fax: 2517-2483

Website: www.csshk.edu.hk

1<sup>st</sup> September, 2022

Dear Parents/Guardians,

Parental Consent Form for Submission of Information of Students with Special Educational Needs

2022-2023 No.004B

(Applicable to newly admitted students/students submitting fresh information)

Name of Student:	( STRN:	)
It has come to our knowledge that your child has s	pecial needs/special educational needs	
(SEN)/academically low achievement (ALA), and we will		
the 3-Tier Intervention Model		

The Education Bureau (EDB) has all along been providing schools with additional resources, professional support and teacher training to help them cater for students with special educational needs (SEN). With parental consent, schools have to submit information of students with special needs/SEN and academically low achievement (ALA) via the EDB's Special Education Management Information System (SEMIS), so that the EDB and the school may use such information for education purposes (e.g. the school will provide the student with support; the EDB will arrange for the allocation of additional resources and professional support, compilation of statistics, etc.).

We hereby seek your consent to having information of the special needs/SEN/ALA (applicable to primary schools) of your child recorded in SEMIS and updated on a need basis. Without your consent, the EDB and the school may not get hold of sufficient information for providing the support that your child needs.

The information will only be used for the above-mentioned purposes. Under the Personal Data (Privacy) Ordinance, you have the right to request access to and update the related information, and to change your option of providing the information. Please send us such request if and when needed.

Please complete the reply slip below and return it to us by 5<sup>th</sup> September, 2022.

Mr. Chim Hon Ming Principal, CSSHK

To: CSSHK		Class No. : ( )		
Reply Slip for Notice on Submission of Information of Students with Special Educational Needs				
<u>2022-2023 No.004B</u>				
Name of Student:	(5	TRN:)		
I acknowledge receipt of the notice on Submi	ission of Information	of Students with Special		
Educational Needs.				
☐ I <u>give my consent</u> for your school to input educational needs (SEN)/academically low				
Education Management Information System (SEMIS) of the Education Bureau (EDB), and				
update such information on a need basis, so that the EDB and the school may use it for				
education purposes.		•		
☐ I <b>do not give my consent</b> for your school t	to input information o	f the special needs/SEN/		
ALA of my child into the EDB's SEMIS for the following reason(s):				
☐ My child does not need special educational support.				
☐ I have reservation about disclosing the SEN of my child.				
Others:				
Name of Student :	Name of parent	:		
Class :	Signature —	:		
STRN :	Contact No.	:		
	Date	: /9/2022		

05.09.2022 Man

<sup>\*</sup>Please tick the appropriate box.