**Annex 1**

**Application for Enhanced Professional Capacity Enhancement Grant**

**(Only applicable to KGs not** **previously provided with**

**Professional Capacity Enhancement Grant**)

***To be returned to Kindergarten Administration 2 Section, Education Bureau on or before 5 March 2024 by post and fax (Address: Room 2329, 23/F, Wu Chung House, 213 Queen’s Road East, Wan Chai, Hong Kong; Fax: 3691 8021)***

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| --- | --- |
| **School information** | |
| |  |  |  | | --- | --- | --- | | Name of School: | (Chinese) |  | |  | (English) |  | |  |  |  | | |
| School Registration No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Our school **was not previously provided** with Professional Capacity Enhancement Grant (PCEG) in the 2021/22 school year. I hereby confirm that our school –  □ **will apply** for the Enhanced PCEG.  □ **will NOT apply** for the Enhanced PCEG. The reasons are as follows:  Reasons: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Please put a “**” in the appropriate boxes* □.) | |
| **Declaration** | |
| **I/ our school:**   1. confirm all the information provided in the application form is factually correct; and 2. will ensure proper use of the grant approved, and undertake to follow the Education Bureau (EDB)’s requirements as stipulated in paragraphs 6 to 15 of EDB Circular Memorandum No. 61/2024 to return the grant to the Government as appropriate. *(only applicable to KGs applying for the Enhanced PCEG)* | |
| Signature of Supervisor: | (School chop) |
| Name of Supervisor: |
| Date: / / |
| Contact person (Name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Post): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Tel. No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |