

Secondary School Places Allocation (SSPA) 2023/2025
Letter of Authorisation for Applying for the
Application Form for Secondary One Discretionary Place
(Only Applicable to Students NOT Participating in SSPA)

Date: _____

To: School Places Allocation Section, Education Bureau

Owing to personal reason, I cannot apply for the Application Form for Secondary One Discretionary Place for SSPA 2023/2025 for the student-applicant _____ (*M/F) at the School Places Allocation Section in person.
(student's name)

I would like to authorise *Mr/Miss/Ms _____ of identity document no. _____ to handle the related procedures on my behalf.

Parent/
Guardian:

(Name) (Identity document no.)

(Contact Tel. No.) (Signature)

* Delete whichever inappropriate