

Tung Chung Catholic School



東涌天主教學校

8 Yat Tung Street, Yat Tung Estate, Tung Chung, NT

新界東涌逸東邨逸東街 8 號

Tel : 2121-0884

Fax : 2109-4803

十月份通告六

中六級數學科聯校模擬考試

本校數學科與同區兩所中學，靈糧堂怡文中學及保良局馬錦明夫人章馥仙中學，將舉行聯校模擬考試，所有中六學生必須出席，是次模擬考試分數將佔全年成績 15%，如學生因要事未能出席，必須事前出示家長信方可補測。詳情如下：

日期	時間	地點
30 / 11 /2019 (星期六)	8:15a.m. – 12:30p.m.	東涌天主教學校 / 靈糧堂怡文中學/ 保良局馬錦明夫人章馥仙中學 學生將被安排前往以上其中一間學校應考， 稍後再公布。

以上通告

中六學生家長/監護人

校長

校長

陳珮珊謹啟

林志江謹啟

二零一九年十月二日

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回 條 (十月份通告六/中六級數學科聯校模擬考試)(請於 9/10/2019 前交回)

本人 ☐ 已詳閱十月份通告六及知悉有關安排。 / ☐ 對本通告有不明白的地方，並欲提出意見：

子女 ☐ 將會出席數學科聯校模擬考試。

子女 ☐ 未能出席數學科聯校模擬考試，並附上家長信說明原因。

學生姓名：_____

班 別：_____

學號：_____

家長/監護人簽署：_____

家長/監護人姓名：_____

日期：_____

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4th Notice for October **Joint School Mock Exam**

2nd October, 2019

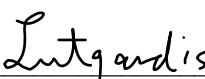
Dear Parents/Guardians,

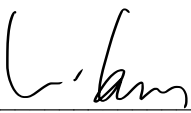
In order to prepare S6 students well for the public exam, the TCCS Mathematics Department is going to cooperate with Ling Liang Church E Wun Secondary School and PLK Mrs Ma Kam Ming-Cheung Fook Sien College in conducting a joint school mock exam. It is compulsory for all S6 students to participate in this exam. The exam is worth 15% of the annual subject mark.

If students need to be absent from the mock exam and hope to apply for a make-up one, they are required to submit a parent letter for leave before the exam. Details are listed as follows:

Date	Time	Venue
30 / 11 /2019 (Saturday)	8:15a.m. – 12:30p.m.	Tung Chung Catholic School, Ling Liang Church E Wun Secondary School or PLK Mrs Ma Kam Ming-Cheung Fook Sien College Students will be taking the Mock Exam in <u>one</u> of the schools above. (To be announced later)

Yours sincerely,


Ms. Chan Pui Shan
Principal


Mr. Lam Chi Kong
Principal

Reply Slip (4th Notice for October / Joint School Mock Exam)
(Please return the reply slip to class teacher on or before 9th October 2019)

- ☐ I have read this notice and have no queries.
☐ I have some queries about this notice and wish to express my view:

- ☐ My child will take part in the Mock Exam.
☐ My child will not take part in the Mock Exam on that day and attach a letter to explain.

Name of Student: _____ Class : _____ Class number: _____

Signature of Parent/Guardian: _____ Name of Parent/Guardian: _____

Date : _____