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TUNG WAH COLLEGE

Student Affairs Office Special Educational Needs Declaration Form

	Form/SAO/202009
Date	Received:

The College is committed to assist students with special educational needs/disabilities in solving problems that may affect their study and campus life. All personal information provided will be kept confidential for need to know basis.

Please submit this form to Student Affairs Office, 19/F, Tung Wah College Ma Kam Chan Memorial Building, 31 Wylie Road, Kowloon, Hong Kong or email to sao@twc.edu.hk

Section A: Student Particulars (* Delete as appropriate)						
Name (Mr/Micc/Mc*)	(Student No.:				
Name (Mr/Miss/Ms*):	(Chinese Name)	Student Ivo				
Due successor of Standard	(Maiam	Contact Phone No.				
Programme of Study:	(Major:					
Section B: Types of Special Educational Needs /	Disabilities (Please "	√" as appropriate)				
Physical Disability	,	11 1				
☐ Visual Impairment						
Hearing Impairment						
Speech Impairment						
☐ Chronic Illness ☐ Mental Illness						
Autistic Spectrum Disorder / Asperger Syndron						
Attention Deficit/ Hyperactivity Disorder (ADI						
Specific Learning Difficulties / Dyslexia	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Others, please specify:						
Section C: Details of Condition / Assistance Req	uest					
Please describe the degree of your special needs/disabil	lities and any assistance	e that may be useful to your study and campus life.				
Section D: Details of Evidence Provided (Please "	(" as appropriate)					
Psychologist's report	us appropriate)					
Registered teacher's report						
Letter from medical practitioner						
Statement of special educational needs						
Others, please specify:						
Section E: Additional Information						
Section F. Declaration (* D. L.						
Section F: Declaration (* Delete as appropriate)						
I agree / do not agree * to supply the information gi	ven in this form and r	related documents regarding my special educational				
needs/disabilities to relevant departments in the Tung W for students with special needs.	an Conege for the plant	ining and provision of equipment and learning support				
101 stadents with special needs.						
Signature of Student:		Date:				
Digitation of Student.		Dutc				