



中華基督教會桂華山中學
THE CHURCH OF CHRIST IN CHINA KWEI WAH SHAN COLLEGE

地址 ADDRESS : 香港北角雲景道 62 號 62, Cloud View Road, North Point, Hong Kong 電話 TEL : 2571 1285
傳真 FAX : 2807 0085 網頁 WEB : <http://www.ccckws.edu.hk> 電郵 EMAIL : mail@ccckws.edu.hk

Notice (2017/2018) No.9
(S.1~S.3)

24th January, 2018

Dear Parent/Guardian,

Please be informed of the following:

1. **Parent Lesson Observation**

The first Parent Lesson Observation will be held from 5th February, 2018 (Monday) to 12th February, 2018 (Monday). If you are interested in the lesson observation, please contact Ms. Cheung Lai Ming, Assistant Principal at 2571 1285.

2. **The Parent's Day**

To inform parents of students' performance in learning and behavior, to strengthen home-school cooperation and connection, the 2nd Parent's Day will be organised on 10th February, 2018 (Saturday) from 8:00am to 4:00pm. The First Term Examination Report Card will be delivered. Attached please find the reply slip and the details of the Parent's Day. Please select a time slot to meet the class teacher. **All students are required to wear full school uniform and to accompany their parents to the Parent's Day.**

3. **Chinese New Year Holiday**

The Chinese New Year Holiday will be from 14th February, 2018 (Wednesday) to 24th February, 2018 (Saturday).

4. **Enquiry**

Should you have any further enquiries, please contact the School Office at 2571 1285 during office hours.

Yours faithfully,



Dr. Cheng Lai-lam, Felix
Principal

Remarks: Please sign the reply slip on or before 26th January, 2018 (Friday).

Bible quote of the month:

And the peace of God, which surpasses all understanding, will guard your hearts and you minds in Christ Jesus. (Philippians 4:7)



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REPLY SLIP

Date: _____

To whom it may concern,

I acknowledge the matters stated in Notice (2017/2018) No. 9 and will comply with the school arrangements.

My preferred time slot for meeting the class teacher is as follows:

(Please put a ✓ in the appropriate box)

AM Session	
<input type="checkbox"/>	8:00am - 8:30am
<input type="checkbox"/>	8:30am - 9:00am
<input type="checkbox"/>	9:00am - 9:30am
<input type="checkbox"/>	9:30am - 10:00am
<input type="checkbox"/>	10:00am - 10:30am
<input type="checkbox"/>	10:30am - 11:00am
<input type="checkbox"/>	11:00am - 11:30am
<input type="checkbox"/>	11:30am - 12:00noon

PM Session	
<input type="checkbox"/>	1:00pm - 1:30pm
<input type="checkbox"/>	1:30pm - 2:00pm
<input type="checkbox"/>	2:00pm - 2:30pm
<input type="checkbox"/>	2:30pm - 3:00pm
<input type="checkbox"/>	3:00pm - 3:30pm
<input type="checkbox"/>	3:30pm - 4:00pm
<input type="checkbox"/>	
<input type="checkbox"/>	

Remarks: If you are not available on that day, please make another appointment with the class teacher.

Signature of Parent/Guardian: _____

Name of Parent/Guardian: _____

Name of Student: _____ Class: ____ No: ____