

<b>DC</b>	<b>Tsung Tsin Christian Academy</b>	<b>FM-DC-13</b>
<b>Valid Period : 1-9-2023 to 31-8-2024</b>	<b>Application for Special Approval: Hair colour/ Hairstyle/ Wearing Accessory</b>	<b>Page of</b>

To whom it may concern,

As my son/ daughter (name) \_\_\_\_\_(class:      class no.:      )

(reason)\_\_\_\_\_

\_\_\_\_\_

I request that you kindly acknowledge our application and consider giving my child a special approval. Thank you for your kind attention.

Yours Sincerely,

Parent's signature:\_\_\_\_\_

Parent's Name:\_\_\_\_\_

Date: \_\_\_\_\_

(Please submit this letter to the General Office within 3 schooldays once school resumes. Thank you!)

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敬啟者：

小兒/ 小女（姓名）\_\_\_\_\_（班別：\_\_\_\_\_學號：\_\_\_\_\_） 茲

因 \_\_\_\_\_，

\_\_\_\_\_。

現特函向 貴校申報，敬希 查照。

此致

基督教崇真中學

學生家長：\_\_\_\_\_ 啟

家長簽署：\_\_\_\_\_

\_\_\_\_\_ 年 \_\_\_\_\_ 月 \_\_\_\_\_ 日

（此申請信須於開學後三天上課天內交回校務處，謝謝！）