

Restricted

CRM-F2C

**To be
completed by
SSD/RH**

**Change of Service for Students in
Schools for Social Development (SSD)/Residential Homes (RH)**

Note: Please fax the information of day students to the Education Bureau (EDB) and the information of boarders to EDB and the Social Welfare Department (SWD). Details are as follows :

- (1) Senior Inspector (Special Education Support 2)2, EDB (Fax No.: 2760 4191)
(2) Senior Social Work Officer (Corrections)2, SWD (Fax No.: 2833 5861)
(3) Referring Agency : _____ (Case Worker: _____) (Fax No. : _____)

Please provide details in the space provided and tick the appropriate box.

(1) Particulars of the Student

Name (Eng) : _____ (Chi) : _____ Sex : _____

Ref. No. : _____ / _____ / _____ SWD No. : _____

H.K.I.C./B.C. No. : _____ EDB Referral Date : _____

(2) Application to changing the mode of service(s) for the above-named student (please enclose the previous CRM-F1 of the student) (* please delete as appropriate)

1. Change from boarder to day student
 2. Change from attending short term adjustment programme to a *day student/ boarder of our school
 3. Change from receiving (*after-school care service/ boarding service) to (*after-school care service/ boarding service)

Detailed reasons for service changes : (Continue on separate paper if required) _____

(3) Progress after acceptance of the application in Part (2)

- An application to change service lodged by our SSD/RH on behalf of the above-named student has been accepted by EDB/SWD. Our SSD/RH has arranged to provide the service to the above-named student starting from the following date :

Date : _____ New Service : Item _____ in Part (2) of this form.

(4) Notification for change from day student to boarder

- An application for boarding service was lodged by the referrer on behalf of the above-named student to EDB/SWD. The application was approved and the above-named student was changed from a day student to a boarder of our school since (date) _____

(5) Latest update / Supplementary information on the case _____

Principal's / Superintendent's Signature : _____

Name of Principal / Superintendent : _____

Name of School / Residential Home : _____

Signature Date : _____