



Po Leung Kuk
Lo Kit Sing (1983) College

保良局羅傑承(一九八三)中學

Cheung Hong Estate, Tsing Yi, N.T., Hong Kong

香港新界青衣長康邨

Tel: 2497 7110

Fax: 2431 1156

Dear Parents,
各位家長：

P18094

Elective Subject Withdrawal
選修科退修建議

In order to allow students to maximize their time in the studying processes, students with unsatisfactory examination performance are advised to withdraw one elective so that they could concentrate more on the core subjects and electives taken. After discussing with teachers concerned and considering the learning effectiveness, your son/daughter is advised to withdraw the following subject:

<input type="checkbox"/> Chemistry 化學	<input type="checkbox"/> Physics 物理	<input type="checkbox"/> Biology 生物	<input type="checkbox"/> Economics 經濟	<input type="checkbox"/> Geography 地理	<input type="checkbox"/> Visual Arts 視覺藝術
<input type="checkbox"/> Chinese History 中國歷史	<input type="checkbox"/> Chinese Literature 中國文學	<input type="checkbox"/> Information Communication and Technology 資訊與科技	<input type="checkbox"/> Business, Accounting and Financial Studies 企業會計與財務概論	<input type="checkbox"/> Physical Education 體育	<input type="checkbox"/> Mathematics Extended Modules 數學(延伸單元)

Students who would like to make an appeal should submit a letter in the name of parents to School within one week after the release of the first examination report (before 3rd March, 2019). Students with elective withdrawn have to attend the designated lessons for enriching their core subjects. Please acknowledge by replying the slip below and return to your form teachers on 26th February, 2019 (Tuesday).

為協助 貴子弟更有效運用學習時間，校方建議 貴子弟於三科選修科中，退選其一，以騰出更多時間鞏固基礎，應付公開考試。家長如有異議，可於上學期考試成績表派發後一星期內（即三月三日前），填妥「保留選修科」申請表格，連同家長信交回班主任。逾期申請將不獲受理，敬希垂注。

敬請填妥回條，著學生二月二十六日（星期二）將回條連同成績表交還班主任。

Po Leung Kuk Lo Kit Sing (1983) College
保良局羅傑承（一九八三）中學

Law Wing Chung 羅穎忠
Principal 校長

24th February, 2019 二零一九年二月二十四日



Reply Slip 回條

P18094

I acknowledge receipt of the above captioned circular concerning 'Elective Subject Withdrawal' and

本人知悉 貴校來函有關「選修科退修建議」事宜，本人

I understand and accept the arrangement. 明白校方的建議及接受安排。

I request for a review on elective withdrawal. 擬為敝子弟申請保留選修科。

Name of Student 學生姓名：_____

Class 班別：_____ CSNO 班號：_____

Name of Guardian 監護人姓名：_____

(Block Letters 中文正楷)

Signature of Guardian 監護人簽署：_____

Date 日期：_____