



二零一八年至一九年度學校通訊第二十號  
2018-2019/School Circular no.20

敬啟者：

To the Parents/ Guardians

香港中學生健康問卷調查

Survey on Hong Kong Secondary School Students' Health

本校素來關顧學生身心健康，現誠邀 貴子女參與香港中學生健康問卷調查。此問卷調查涵蓋學生抗逆力和健康情況，對推廣香港中學生健康有莫大裨益。

Expressing concerns over students' health, the College is inviting students to participate in the Survey on Hong Kong Secondary School Students' Health. The survey covers students' resilience and health, aiming at promoting secondary school students' well-being.

是次問卷調查為自願性質，所有問卷的資料將會保密處理。請於回條表明閣下是否同意 貴子女參與是次調查。

The survey will be completed on voluntary basis. All information collected will be kept confidential. Please kindly state if you would like your child to participate in the survey.

請家長簽妥回條後，囑咐學生於十月十九日交回班主任。

Please complete the reply slip and remind your child to return it to the class teacher on 19<sup>th</sup> October, 2018.

此致

貴家長/監護人

Thank you for your kind attention.

輔導組啟

Guidance Committee

二零一八年十月十八日

18<sup>th</sup> October, 2018

回條

Reply Slip



有關學校通訊第二十號「香港中學生健康問卷調查」事宜業已閱悉。

I have been clearly informed about the matters enlisted in School Circular no.20 "Survey on Hong Kong Secondary School Students' Health".

本人同意子女參與香港中學生健康問卷調查。

I agree with my child's participation in the Survey on Hong Kong Secondary School Students' Health.

本人不同意子女參與香港中學生健康問卷調查。

I do not agree with my child's participation in the Survey on Hong Kong Secondary School Students' Health.

此覆

輔導組

To Guidance Committee

學生姓名：\_\_\_\_\_

Student's name

班 別：\_\_\_\_\_ ( )

Class

家長/監護人簽署：\_\_\_\_\_

Signature of Parent/ Guardian

二零一八年十月 日

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