



Sir Ellis Kadoorie (S) Primary School

9 Eastern Hospital Road, Sookunpo, Hong Kong

Tel: 2577 3489

Fax: 2882 4520

Web: www.sekps.edu.hk

E-mail: webmaster@sekps.edu.hk

24th June, 2022

Notice 98 / 2021-2022

To Parents and Guardians,

Updated Arrangement for UAP P.4 (II)

With reference to notice 46, the UAP's schedule is updated. Details are as follow:

Date	11 th July, 2022 (Mon) 13 th July, 2022 (Wed) 18 th July, 2022 (Mon) 20 th July, 2022 (Wed) 25 th July, 2022 (Mon) 27 th July, 2022 (Wed) 3 rd August, 2022 (Wed)
Time	02:00-04:00 p.m.
Remarks	1) Pupils please prepare for their own lunch. 2) The programme will be conducted face-to-face after school. 3) According to EDB announcement on 11 Apr, flexibilities will be given to vaccinated students to participate in non-academic extra-curricular activities outside classes. Only students who have received the second dose of vaccination for more than 14 days before the designated date may join this after school visit/activity.

Please return the reply slip to your class teachers on or before 28/6/2022. For enquiries, please contact Mr. Wong (SGP) at 2577 3489. We are looking forward to your participation in this exciting activity.

Your sincerely,

Ms. Yu Hing Yin

Headmistress

Seize the Day



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Seize the Day

Our Vision: Develop fully pupils' potentials
Equip them with life-long learning skills
Help them integrate into local community
Develop a global outlook

Our Mission: It is our mission to provide a positive learning environment that enhances each child's opportunity to learn and to develop through educational programme which recognizes the need for growth in moral, intellectual, physical, social and athletic skills, knowledge and attitude.



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Reply Slip

Notice 98 / 2021-22

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(Please return this reply slip to Mr. Wong, SGP, on or before 28-06-2022.)

Date : _____

To the Headmistress,

I have read the Notice 98/ 2021-22 dated 24th June, 2022 and fully understand its content.

My child ☐ will not join the "UAP P.4".
☐ will join

My child ☐ will go home by himself after the activity .
☐ will be picked up by parents

Name of Pupil: _____() Class: _____()

Name of Parent/Guardian in BLOCK LETTERS: _____

Signature of Parent/Guardian: _____ Emergency Telephone No.: _____

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