

德貞女子中學
二零二四至二零二五年度
中六級英文科增潤班通告

敬啟者：

為協助同學預備中學文憑試，本校英文科將舉辦中六級英文增潤班，貴子女被安排 A/B/C/D 班，每班各 13 節，詳情如下：

科目：	英文
日期：	2024 年 10 月 8, 17, 22 日 11 月 5, 12, 19, 26 日 12 月 3, 10, 17 日 2025 年 1 月 7, 14, 21 日 (共 13 節)
地點：	A 班：701 室； B 班：703 室； C 班：704 室； D 班：706 室
開始時間：	下午 3 時 30 分
完結時間：	下午 5 時正
負責老師：	古浩芬老師
備註：	學生必須依時出席所有課堂。如需請假，應當按正常請假程序處理，否則作不按程序告假或曠課處分。

請著 貴子女於 10 月 4 日前，把回條交回英文科科任老師，並督促 貴子女依時出席課堂。如有任何問題，請致電 2729 3211 與古浩芬老師聯絡。

此致
學生家長

德貞女子中學校長

謹啟

二零二四年十月三日

-----回 條-----

編號：070

敬覆者：

本人已知悉 貴校中六級英文增潤班安排，定當督促小女準時出席課堂。

此覆
德貞女子中學校長

中____級____班____號學生：_____

學生家長/監護人簽署：_____

學生家長/監護人姓名：_____

學生家長/監護人電話：_____

二零二四年十月____日

(收集家長/監護人聯絡電話，目的是讓負責老師在有需要時聯絡家長，有關資料將於活動完結後銷毀。)

Tack Ching Girls' Secondary School
2024-2025
S6 English Language Enrichment Programme

No: 070

3rd October, 2024

Dear Parents/ Guardians,

To better prepare students for their upcoming HKDSE, the English Department is organizing the S6 Enrichment Programme. Your daughter will be arranged to Class A / B / C / D, each of which has 13 sessions. Please refer to the details as follows:

Subject:	English Language
Dates:	2024 Oct 8, 17, 22, Nov 5, 12, 19, 26, Dec 3, 10, 17 2025 Jan 7, 14, 21 (13 sessions)
Venue:	Class A: Room 701, Class B: Room 703 Class C: Room 704, Class D: Room 706
Starting time:	3:30 p.m.
Finishing time:	5:00 p.m.
Teacher-in-charge:	Ms Koo Ho Fun
Remarks:	Students must attend all classes on time. If they need to take leave, they should follow the school's leave of absence procedures; otherwise, it will be treated as an unexcused absence / truancy.

Please complete and return the reply slip to the English teachers before 4th October, 2024, and urge your child to attend the scheduled sessions punctually. If you or your child have any enquiries, please feel free to contact Ms Koo Ho Fun at 2729 3211.

Yours faithfully,

Ms Carol Chung
Principal

----- Reply Slip -----

No: 070

_____ October, 2024

Dear Principal,

I have been informed that my child will participate in the S6 English Enrichment Programme and will urge my child to attend the above sessions punctually.

Name of student: _____

Class & Class No.: _____

Signature of Parent/Guardian: _____

Name of Parent/Guardian: _____

Phone number of Parent/Guardian: _____

(Collection of parents' contacts is for safety reasons in case of emergency. The information will be discarded after the activity.)