

## LI KWAN HUNG EDUCATION FUND

### The Donor

The Late Mr. Li Kwan Hung, MBE, JP was one of the founders of the Hong Kong PHAB Association (the Association) and was its chairman since the inception of the Association in 1972 until his retirement in 1982. The fund was first set up in 1982 with an initial donation of \$100,000 by Mr. Li. After Mr. Li's death in 1993, the Li family contributed another \$182,614.01 towards the Fund.

### Purpose

The Fund is intended to assist students with disabilities studying with their able-bodied counterparts in local educational institutes at various levels.

### Criteria of Application

Applicant should meet all the following criteria:

1. Hong Kong permanent residents;
2. students with physical disabilities, intellectual disabilities, special educational needs (SENs) (including autism / attention deficit and hyperactivity disorder / dyslexic), chronic illness, visual impairment or hearing impairment;
3. full-time students studying with their able-bodied counterparts in local educational, technical or vocational training institutes at primary, secondary, post-secondary, university or post-graduate level;
4. in need of financial assistance for educational purposes.<sup>1</sup>
5. estimated expenses of the applicant for the academic year are not covered by other bursaries or funds (according to the status as at the deadline of application).

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<sup>1</sup> Under normal circumstances, the average monthly household income, excluding assets, of the applicant and the household members residing with him/her in the past 12 months immediately before the month of submitting the application should not exceed the Median Monthly Domestic Household income. Income includes employment earnings (salary, double pay/leave pay, work allowance, bonuses/prize/commission/tip/contract gratuity, income from rendering services, business profits) and other income (contributions from children, financial assistance from relatives/friends, alimony, rental income, and monthly pension/widow's and orphans' payment or pensions) but excludes employee's mandatory contributions to MPF scheme, financial assistance provided by the Government, charitable donations, subsidies from other assistance programmes/funds.

## Scope of Support

Based on the level of study and the nature of disability of the applicant, a grant could be considered for the following eligible items. The grant for each applicant will normally not exceed \$5,000.

	Primary	Secondary	Post-secondary/ Vocational Training	University/ Post-graduate
Students with physical disabilities	<ul style="list-style-type: none"> <li>• Transportation</li> <li>• Educational equipment/aids</li> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Transportation</li> <li>• Educational equipment/aids</li> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Transportation</li> <li>• Educational equipment/aids</li> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Transportation</li> <li>• Educational equipment/aids</li> <li>• Hostel fees</li> <li>• Student exchange program organized by applicant's school</li> </ul>
Students with intellectual disabilities / SEN / chronic illness	<ul style="list-style-type: none"> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Educational equipment/aids</li> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Educational equipment/aids</li> <li>• Hostel fees</li> <li>• Student exchange program organized by applicant's school</li> </ul>
Students with visual impairment	<ul style="list-style-type: none"> <li>• Visual aids</li> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Visual aids</li> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Visual aids</li> <li>• Educational equipment/aids</li> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Visual aids</li> <li>• Educational equipment/aids</li> <li>• Hostel fees</li> <li>• Student exchange program organized by applicant's school</li> </ul>
Students with hearing impairment	<ul style="list-style-type: none"> <li>• Hearing aids</li> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Hearing aids</li> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Hearing aids</li> <li>• Educational equipment/aids</li> <li>• Extra-curricular activities fees</li> </ul>	<ul style="list-style-type: none"> <li>• Hearing aids</li> <li>• Educational equipment/aids</li> <li>• Hostel fees</li> <li>• Student exchange program organized by applicant's school</li> </ul>

If the actual expenditure on the approved item(s) is/are lower than the budgeted expenditure, the amount to be reimbursed may be adjusted accordingly.

### **Priority**

In case of insufficient funds for allocation to all eligible applicants, priorities will be given to those with good academic achievement.

### **Amount for Allocation**

An amount equivalent to the yearly income from the Fund will be used for allocating grants to applicants. The amount for each grantee will depend on his/her financial situation and need, as well as the number of grantees approved by the Association's Finance Committee. Under special circumstances, the Finance Committee is authorized to utilize up to 10% of the principal amount for allocation. Above which, approval from the Board of Directors is required.

### **Method of Application**

1. Invitation for application will be announced in August each year.
2. Application forms are available at schools, tertiary institutes and concerned organizations; or can be downloaded from the Association's website.
3. Each application form should be duly completed by the applicant and recommended by a responsible officer of the educational/welfare organization or a government department, e.g. school principal, social worker, dean of students, etc.
4. All applications must reach the Executive Director of the Hong Kong PHAB Association at Unit 1402, The Hong Kong Federation of Youth Groups Building, 21 Pak Fuk Road, North Point, Hong Kong not later than mid-October of each calendar year. Late applications or applications without submitting the required information or supporting documents before the due date will not be considered.

### **Selection Procedure**

All applications will be screened by the Finance Committee of the Association. Eligible applicants may be invited to attend an interview in order to judge the nature of their disability and financial needs. The result of the selection is expected to be announced before the end of December. The decision of the Committee shall be final. In no circumstances will the Committee be required to explain why any application has not been successful.

### **Management**

The Fund is managed by the Finance Committee of the Association. The Committee is fully authorized to invest the capital fund, vet and approve applications, allocate grants, revise and amend criteria of applications or other rules and handle all other

matters related to the management of the Fund.

**Enquiries**

For enquiries, please telephone the Association's Headquarters at 2551 4161.

Revised on 1.1.2018, 21.7.2021

## 李鈞洪教育基金申請表

### 個人資料收集聲明

你所提供的資料將用作本基金審核你的申請。若你未能提供足夠個人資料，本基金將不能處理你的申請。請確保你所提供之資料為準確。除個人資料（私隱）條例所訂明的豁免或由於資料在保留期間後已被刪除外，你有權查閱和改正你的個人資料。查閱和改正個人資料的要求應以書面向香港傷健協會行政事務經理（地址：香港北角百福道 21 號香港青年協會大廈 1402 室）提出。

### 甲部：申請人資料

姓名（中文）	（英文）	性別
出生地點	出生日期	居港年數
住址		聯絡電話
傷殘狀況		
申請人是否本會屬下傷健中心會員？ <input type="checkbox"/> 是（所屬傷健中心_____ 會員年資_____年____月） <input type="checkbox"/> 否		
申請人現時有沒有領取傷殘津貼？ <input type="checkbox"/> 有（請附上證明文件） <input type="checkbox"/> 沒有		
申請人／其家庭是否綜援受助者？ <input type="checkbox"/> 是（請附上證明文件） <input type="checkbox"/> 否		

### 乙部：家庭狀況 -- 請將全部同住之家庭成員之資料據實填報（包括申請人）

姓名	與申請人關係	年齡	已婚／未婚	職業／就讀學校及班級	去年四月至本年三月之總收入（港幣）	
					薪金	其他（請註明收入總額及性質）
	申請人					

\* 其他收入包括由非同住之家庭成員或親友給予之資助

居所類型	<input type="checkbox"/> 宿舍 <input type="checkbox"/> 公屋 <input type="checkbox"/> 居屋 <input type="checkbox"/> 私人樓宇
	<input type="checkbox"/> 自置（每月供款：\$ _____） <input type="checkbox"/> 租住（每月租金：\$ _____）

### 丙部：擬／現就讀課程

學校名稱
就讀課程名稱及級別
申請人是否已被接納入學？ <input type="checkbox"/> 是 <input type="checkbox"/> 否

### 丁部：財政預算及申請資助項目

#### 1. 申請人擬／現就讀之課程所需之支出及擬向本基金申請資助項目及金額

	申請人擬／現就讀之課程所需之支出 (以全年計算)	擬向本基金申請資助金額
學費	\$	\$
書簿費	\$	\$
特殊學習器材 (請列明名稱及用途)		
i. _____	\$	\$
ii. _____	\$	\$
iii. _____	\$	\$
交通	\$	\$
其他 (請註明: _____)	\$	\$
<b>總額</b>	<b>\$</b>	<b>\$</b>

#### 2. 申請人於本學年有否向其他基金或機構申請資助／貸款？ 無 有 (請列明)

基金／機構名稱	申請資助／貸款金額	資助／貸款用途	是否已獲批准 (請於適當空格加上✓號)	預計公佈結果日期
			<input type="checkbox"/> 已獲批准	
			<input type="checkbox"/> 結果仍未發出	
			<input type="checkbox"/> 已獲批准	
			<input type="checkbox"/> 結果仍未發出	

### 戊部：聲明

本人茲聲明以上資料確實無誤，如有填寫任何虛假資料，會方有權撤銷本人之申請。

申請人簽署：\_\_\_\_\_ 日期：\_\_\_\_\_

備註：申請表須由推薦機構直接寄交本會，並附上以下之證明文件副本：

1. 申請人之香港身份證副本
2. 康復服務中央檔案室發出的殘疾人士登記證副本
3. 申請人／其家人的現時領取傷殘津貼證明文件副本及／或領取綜援證明文件副本 (如適用)
4. 所有家庭成員之收入證明 (如稅單)
5. 居所之供款／租金證明文件
6. 申請人上學年之成績表／公開考試成績單
7. 申請人之入學／學校取錄證明文件
8. 支出項目的證明文件，例如繳交學費通知書／學習器材報價單／課外活動章程／宿舍費用繳費通知書

## 由推薦機構填寫

由推薦機構（如申請人就讀之學校或福利機構）填寫，並請推薦機構直接寄交香港北角百福道 21 號香港青年協會大廈 1402 室香港傷健協會總幹事收。結果將專函通知申請人。

申請人之財政需要

課程對申請人之適合性

申請人就讀該課程之成績或特別表現

其他

推薦人簽署：\_\_\_\_\_ 職位：\_\_\_\_\_

推薦人姓名：\_\_\_\_\_ 機構名稱：\_\_\_\_\_

機構地址：\_\_\_\_\_

聯絡電話：\_\_\_\_\_ 日期：\_\_\_\_\_

## 由香港傷健協會填寫

資助金額

評語