



# HONG KONG ADVENTIST ACADEMY

## 香港復臨學校

### Church Recommendation Form

**Dear Pastor / Elders,**

The parents mentioned below have applied to have their child admitted to Hong Kong Adventist Academy. In order for us to make the decision on Adventist scholarship subsidy, please provide us with the best possible information with regards to their church membership and involvement. Thank you

Name of Students: \_\_\_\_\_

Birthday (dd/mm/yyyy): \_\_\_\_\_

Applying Grade: \_\_\_\_\_

**Applicant's Details (Parents)**

Name of the Father: \_\_\_\_\_

Are you SDA: **Y** **N**

Name of the Mother: \_\_\_\_\_

Are you SDA: **Y** **N**

Applicant is baptized (attached baptism certificate) **Y** **N**

Church Membership (name and address of Adventist congregation): \_\_\_\_\_

### Church Involvement (to be completed by a Church Pastor or Elders):

Involvement in church ministries **Y** **N**  
(Specify which ministry): \_\_\_\_\_

Regularly attends Church Service **Y** **N**

Regularly attends Sabbath School **Y** **N**

Please share any other comments you may have about the applicant and/or his or her family:

Name & Signature: \_\_\_\_\_

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

Position and Church Organization: \_\_\_\_\_

Church Stamp: \_\_\_\_\_

Please fold, staple, and put in the mail, fax to 2623-0431 OR email to [admissions@hkaa.edu.hk](mailto:admissions@hkaa.edu.hk). Thank you.



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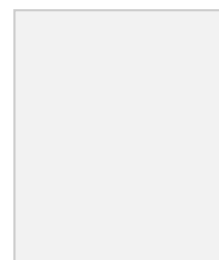
香港復臨學校

.....Please Fold Here.....

From: .....

.....

.....



Hong Kong Adventist Academy

1111 Clear Water Bay Road

Sai Kung, NT

Hong Kong, SAR

.....Please Fold Here.....



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