

## Sacred Heart Canossian College

諾 心 2 Chi Fu Close, Pokfulam, Hong Kong 香港薄扶林置富徑二號

電話: (852) 2550 6111 Tel 電傳: (852) 2875 3242 Fax Email 電郵: office@shcc.edu.hk Website 網址: http://www.shcc.edu.hk

## Parent Declaration Form for Special Educational Needs (SEN)

Our school aims to address the learning needs of all students and cater for learner diversity. All information collected will be used for providing assistance for students with special educational needs only and will be kept CONFIDENTIAL. Documentary evidence of any SEN declaration is necessary.

Please send the declaration form and the documents to the school office in person or by registered letter to the attention of Mrs Ivy Yeung, the SENCO.

My daughter is diagnosed to have the following SEN:

Types of Special Educational Needs	Supporting document(s) attached	
Please put a $\checkmark$ in the appropriate box(es).	Assessment report by medical	Others
	professionals or health care providers	(Please specify)
Attention Deficit/Hyperactivity Disorders (AD/HD) 注意力不足/過度活躍症		
Autism Spectrum Disorder (ASD) 自閉症		
Hearing Impairment (HI) 聽覺障礙		
Intellectual Disability (ID) 智力障礙		
Mental Illness (MI) 心理疾病		
Physical Disability (PD) 肢體傷殘		
Speech and Language Impairment (SLI) 言語障礙		
Specific Learning Difficulties (SpLD), e.g. Dyslexia 特殊學習困難, 例如: 讀寫障礙		
Visual Impairment (VI) 視覺障礙		
Others, e.g. Chronic Illness 長期病患 (Please specify)		

I understand that the above information helps the school consider special arrangements to assist my daughter's learning. I agree to the transfer of the information to the parties concerned.

I acknowledge that this authorisation may be revoked at any time with my written notification, except to the extent that SEN Support has already acted in reliance on it. If not revoked, the authorisation will expire upon the termination of my daughter's enrolment in this school.

Name of Student:	Class:	Class No.:
Name of Parent:	Signature of Parent:	
Contact Number:	Date:	

## **Our Mission**