



惠僑英文中學

WAI KIU COLLEGE

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Ref. No: LT\_ST 25-26/21(E)

17<sup>th</sup> November, 2025

Dear Parents/Guardians,

**Visit to Jinan University and Hong Kong University of Science and Technology (Guangzhou)**

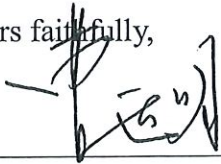
To help students gain a deeper understanding of the learning environment and pathways for further studies at higher education institutions in Mainland China, our school's Life Planning Team is organizing a "Visit to Jinan University and Hong Kong University of Science and Technology (Guangzhou)." This visit will guide students to explore campus of universities, allowing them to learn about its historical background, academic programs, campus culture, and information on further studies. During the event, students will tour various campus facilities, including the library, laboratories, and student dormitories. Details are as follows:

Date	15 <sup>th</sup> December(Mon) to 16 <sup>th</sup> December(Tue)	Quota	28 students
Venue	Guangzhou City (Jinan University and Hong Kong University of Science and Technology (Guangzhou), Pearl River)	Fee	Free of charge
Time of Gathering	15 December, 2025 (Monday) 8:30 a.m.	Place of Gathering	School tuck shop
Time of Dismissal	16 December, 2025 (Tuesday) 5 p.m.	Place of Dismissal	School
Teachers in-charge	Ms CHAO Iok-leng, Mr SIU Hoi-leung, Mr. CHEUNG Ho-wah, Ms PANG Wing-sum	Transport	Coach
Remarks	<ol style="list-style-type: none"><li><b>All participating students must bring a valid Hong Kong ID Card and Home Returns Permit with at least 6 months' validity on the departure date.</b></li><li>Students must wear proper casual wear. All students must adhere to the instructions of the teachers in-charge. Any violations will be handled in accordance with school regulations.</li><li>If there are any special health conditions or special arrangements needed (such as dietary restrictions: vegetarian, allergies, etc.), please specify at the time of</li></ol>		

	<p>registration for appropriate arrangements.</p> <ol style="list-style-type: none"><li>4. The school will purchase comprehensive travel insurance for all student participants.</li><li>5. If Hong Kong Observatory has hoisted Typhoon Signal No. 3 or above, Red Rainstorm or Black Rainstorm before 6.am. or after 7 a.m., the activity will be cancelled. In case of bad weather on the day of the event, the teacher will arrange for the students to return home as soon as it is safe to do so.</li><li>6. Please refer to the Appendix for other information of the activity.</li></ol>
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Please complete the reply slip and return it to Mr SIU Hoi-leung on or before 21<sup>st</sup> November, 2025 (Friday). Should you have any questions about the above activity, please contact Mr SIU Hoi-leung at 2777-6289.

Yours faithfully,



TSO Tat-ming

Principal

(Note: The circular is only valid with the school chop)

**Visit to Jinan University and Hong Kong University of Science and Technology (Guangzhou)**

**Reminders**

1. When getting on and off the coach, students should be careful and follow the instructions of teachers to behave properly.
2. On board, students should stay in seat quietly and keep the coach clean. Students are prohibited to push the door or other equipment in the coach.
3. Students must bring their student card and identity card and follow the instructions of teachers.
4. Students should not be large amount of cash or valuables. Students should also take care of their personal belongings to prevent unnecessary loss.
5. Students must follow school rules during activities outside school.
6. **Considering potential hygiene risks and genuine needs, students should not order food or beverages from any food delivery platforms.**

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**Reply Slip**

Ref. No. : LT\_ST 25-26/21(E)

Dear Principal,

Being the parent of \_\_\_\_\_ of Class \_\_\_\_\_ (\_\_\_\_), I acknowledge the details of "Visit to Jinan University and Hong Kong University of Science and Technology (Guangzhou)" organized by your school, and I agree / do not agree\* for my child to participate in this visit.

Special dietary requirements (if any): \_\_\_\_\_

Special health conditions (if any, please specify): \_\_\_\_\_

Parent's Signature : \_\_\_\_\_

Parent's Name : \_\_\_\_\_

Parent's Contact Number : \_\_\_\_\_

Student's Contact Number : \_\_\_\_\_

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

*\*circle as appropriate*