



Baptist Lui Ming Choi Secondary School

Address: 11 Yuen Wo Road, Lek Yuen Estate, Shatin, N.T.

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For Office Use Only

Application received

on: ___/___/___

REQUEST FOR TRANSCRIPT(S) / PREDICTED GRADES OF ACADEMIC RECORD

I. Personal Particulars (*Please delete as appropriate)

Applicant's name (Mr / Ms*): _____
(in English) (in Chinese)

HKID No.: _____ Email Address: _____

Telephone No.: (Office) _____ (Home) _____ (Mobile) _____

Year of admission: _____ Class first admitted: _____

*Present class: _____ / Year graduated / withdrawn: _____ Class when left: _____

Processing Time:

10 working days

II. Recipient(s) of Transcript(s) / Predicted grades

Name & address of organization / institute (Please write clearly to avoid postal errors)	Country	No. of copies

III. Programme of Study (*Please as appropriate)

- Another local secondary school IVE
- High Cert / Diploma in * _____ Associate Degree
- Exchange program e.g. AFS Overseas institute
- Others (Pls specify): _____

IV. Collection of transcript(s) (*Please tick or delete as appropriate)

I prefer to let you seal the transcript(s) in BLMCSS envelope / the envelope provided * and the sealed transcript(s) to be

- sent out directly to the organization / institute.
- collected in person by me / my authorized representative*.
- Authorization for collection of transcript(s)

I authorize Mr / Ms * _____ to collect my transcript(s) for me.

(He / she * will bring along a copy of my HK identity card for your verification.)

_____ (signature of applicant)

_____ (Date)

Transcript(s) received by:

_____ (signature of applicant / authorized representative*)

_____ (Date)

FOR OFFICE USE

Transcript(s) prepared by: _____ (/ /) Checked by: _____ (/ /)

Sent out / Obtained on : _____ / _____ / _____