

ALL CORRESPONDENCE SHOULD BE
ADDRESSED TO THE HEADMASTER
TELEPHONE: (852) 2711 5191
FAX: (852) 2761 1026
EMAIL: dbsadmin@dbs.edu.hk



DIOCESAN BOYS' SCHOOL
131 ARGYLE STREET,
KOWLOON,
HONG KONG
WEBSITE: www.dbs.edu.hk

Notice No.: SN/2007-113

31 July 2020

Dear Parents / Guardians,

Arrangement for August 2020

In light of the escalating COVID-19 pandemic in recent days, **school notice regarding the promotion to all grades along with further arrangements for September will be released in due course**, after the official announcement from the EDB about the arrangements for school commencement in Hong Kong.

Meanwhile, the marked exam scripts will be returned to G11 students as they need to prepare for the HKDSE exams. The special arrangements for the return of marked scripts to G11 students are as follows:

Date	Grade	Special Arrangements
14 – 15 Aug (Fri – Sat)	G11	<ul style="list-style-type: none">G11 parents or authorized persons (with letter of authorization) should bring along (1) their own HKID, and (2) student ID, and (3) completed Health Declaration Form (see attached) in order to collect marked scripts in the School Hall during office hours. (Friday – 09:00 to 16:00; Saturday – 09:00 to 13:00)
17 – 19 Aug (Mon – Wed)	G11	<ul style="list-style-type: none">Live lessons through ZOOM for checking of marks (Follow Mon -Wed timetable)

Parents are requested to keep track of notices posted on the DBS school website for any latest arrangements as we navigate the ever-changing circumstances.

Thank for your understanding and cooperation

Yours faithfully,

R.K.Y. Cheng
Headmaster



拔萃男書院

DIOCESAN BOYS' SCHOOL

家長或監護人健康申報表 **Parent's / Guardian's Health Declaration Form**

家長或監護人姓名 Name of Parent / Guardian : _____

學生姓名 Name of Student : _____

班別 Class : _____

本人聲明以下所有申報的資料均正確屬實。

I declare that all information given below is true and correct to the best of my knowledge.

- | | 是 Yes | 否 No |
|--|--------------------------|--------------------------|
| (a) 我的體溫在 38° C 或以上。
My body temperature is 38° C or above | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) 在 14 天內我有急性呼吸道感染徵狀（例如咳嗽、氣促等）。
In the past 14 days I have acute respiratory tract infection symptoms
(such as cough or shortness of breath, etc.) | <input type="checkbox"/> | <input type="checkbox"/> |
| (c) 在 14 天內我有到內地或其他要求強制隔離的國家或地區。
In the past 14 days I have been to Mainland China or countries / regions
where mandatory quarantine is required. | <input type="checkbox"/> | <input type="checkbox"/> |

日期 Date

家長或監護人簽署 Parent's / Guardian's Signature

注意事項 Point to note:

如家長在上述任何聲明中表示「是」，便不應參與本日活動。請聯絡校務處再作安排。

Parents indicating 'Yes' in any of the statements above should NOT attend the event and should contact the General Office for further arrangement.