



請必須填寫有 \* 的部份，資料不全，恕不受理。Area with \* are required.

# 跳級或插班考試表格

## Placement Test Form

### 跳級或插班考試規則

博愛跳級的學生或校外插班生都必須接受考試測驗。學生所要跳或要插班的年級不可以超越其日校就讀的年級。請提供日校的班級文件。

特別條例：博愛的學生若需要參加跳級考試，必須要有博愛現任班級教師的推薦和博愛教務組的同意。跳級或插班考試必須繳交\$20 手續費(不退費)。如果學生錯過了考試日期, 不允許補考。

### Placement Test Policy

Non BCS students/BCS student are required to take an oral and written examination when transferring from a lower grade level to a higher grade level, or from one language program to another. Students may not request to skip a grade level that is higher than their current day school level. You must provide a day school grade document.

Exceptions: BCS student must have a recommendation from their current BCS teacher as well as the approval of the BCS Academic Committee.

There is a non-refundable \$20 fee for each placement test application. No make-up exam will be given if the student misses the test.

### 學生資料 Student Information

中文姓名 Chinese name \_\_\_\_\_ \* 英文姓名 English name \_\_\_\_\_ 學生學號 Student ID \_\_\_\_\_

\*原語文班級 Current Language Class \_\_\_\_\_ 欲轉入語文班級 Intended Language Class/Grade \_\_\_\_\_

\*日校班級 Day School Grade (Placement Test Only) \_\_\_\_\_ 考試日期 Placement Test Date \_\_\_\_\_  
Only skip one grade level

家長電子郵件 Parent's email address \_\_\_\_\_ \*聯絡電話 Phone number \_\_\_\_\_

\*家長簽名 Parent's signature \_\_\_\_\_ 日期 Date \_\_\_\_\_

OFFICE USE ONLY	
CK# _____	\$ _____
Staff Init. _____	Date _____
Class _____	Class ID# _____

OFFICE USE ONLY	
Received By _____	Date: _____
教務組批准 Academic Committee	Date: _____
註冊組批准 Registration	Date: _____
教務副校長批准 VP of Instruction	Date: _____