



通告編號：2022/23-007

**學生注射新冠疫苗統計 (2022年9月)**

各位家長：

根據教育局最新指引，若已完成接種兩劑新冠疫苗並超過十四天的同學人數達到全校可接種疫苗的學生總人數的90%或以上，學校便可考慮安排全校恢復全日面授課堂。若只有個別級別的同學達到以上條件，教育局亦會允許有關級別的同學進行全日面授課堂及其他活動。

為了統計同學接種疫苗的情況，請家長於9月2日(星期五)或以前，將以下問卷交回班主任。

敬祝  
安康！

校長  
談國軒

二零二二年九月一日

-----  
回條

談校長：

截至2022年8月31日，本人子女接種2019冠狀病毒病疫苗的情況如下：  
(可選多於一項) 請在適當的位置上劃上“✓”

<input type="checkbox"/>	已完成接種一劑疫苗
<input type="checkbox"/>	已完成接種二劑疫苗
<input type="checkbox"/>	已完成接種三劑疫苗
<input type="checkbox"/>	曾確診並已上報衛生防護中心
<input type="checkbox"/>	有醫生證明暫不宜接種疫苗
<input type="checkbox"/>	因其他因素而未接種疫苗

最後接種日期：2022年\_\_月\_\_日

學生姓名：\_\_\_\_\_

家長簽名：\_\_\_\_\_

班 別：\_\_\_\_\_ ( )

日 期：二零二二年九月\_\_\_\_日





Circular No.: 2022/23-007

1<sup>st</sup> September, 2022

Survey of COVID-19 Vaccination of student (September 2022)

Dear parent,

According to the guidelines of The Education Bureau, if 90% or more of the total number of students of the school eligible to receive vaccination have received two doses of vaccine for more than 14 days, the school may arrange whole-day face-to-face classes for the whole school. Otherwise, if the number of such students of an individual class level has reached the above requirements, school may arrange whole-day face-to-face classes and other activities for students for that individual class level.

In order to obtain the up-to-date vaccination records of students, please complete and return the following questionnaire to the class teacher on or before 2 September 2022 (Friday).

Thank you for your attention.

Yours sincerely,

Tam Kwok Hin  
Principal

-----  
Reply slip

Please choose the option(s) below that best describe the situation of your child's COVID-19 vaccination as of 31 Aug 2022.

Please put a "✓" in the appropriate box(es)

<input type="checkbox"/>	Have received the 1st dose
<input type="checkbox"/>	Have received the 2nd dose
<input type="checkbox"/>	Have received the 3rd dose
<input type="checkbox"/>	Have previously been infected with COVID-19 and was reported to the Centre for Health Protection
<input type="checkbox"/>	Medically declared not suitable to receive COVID-19 vaccine (Medical certificate is required )
<input type="checkbox"/>	Other reasons for not suitable to receive COVID-19 vaccine

Date of the most recent vaccination (dd/mm/yyyy): \_\_\_\_\_

Name of Student : \_\_\_\_\_

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

Class: \_\_\_\_\_ ( )

Date: 1/9/2022

