設置宗旨：為幫助和鼓勵清寒大學生追求知識與真理，本會副主席葉貞吟（千葉源）女士特拋磚引玉成立本助學金專案，旨在提倡「雪中送炭、飲水思源」及「受恩施恩，薪火相傳」的精神，更期望學生將來畢業後能夠關懷社會、回饋社會，為後代創造更美好的未來。

註：自2007年以來，香港、澳門、台灣及中國內地等地，已逾768人次受惠。

申請日期：2010年5月13日至2010年10月8日。

助學金金額：香港：港幣5,000元/名；澳門：澳幣5,000元/名；台灣：新台幣10,000元/名；新加坡：坡幣1,000元/名；中國內地：人民幣2,000元/名。

申請資格：
1. 家境清寒、低收入戶或家庭發生重大急難者。
2. 香港、澳門、台灣、新加坡及中國內地等地各大學及研究所在學學生。

申請程序：
1. 申請人請自本會網站www.hmtcf.org下載所需表格。
2. 只接受電子郵件申請，專案信箱：2010.HMTCF.Angel.Care.Projects@gmail.com
3. 請填助學金申請表格(A)(B)(C)，並附：上學期成績單之副本及在學學校二位師長簽署推薦表格，新生的推薦師長其中一位可由前一階段就讀學校師長推薦。
4. 申請人10日內將收到本會「助學專案確認編號」確認電郵。

審核：
10月11日~30日：初審。
11月1日~26日：複審。
12月8日：將在本基金會網站公佈「助學專案入選確認編號表」。

助學金頒發：由本會通知各入選學生之就讀學校，由各校按個別行政程序頒發予受惠學生。

審核委員會：委員：總捐款額港幣五千元或以上者。
審核委員：總捐款額港幣一萬元或以上者。
審核委員顧問：總捐款額港幣三萬元或以上者。
監察審核委員：總捐款額港幣五萬元或以上者。
總委員顧問：「監察審核委員」中年齡超過七十歲之善長仁翁。

查詢：電郵：2010.HMTCF.Angel.Care.Projects@gmail.com
捐款專戶：香港恆生銀行：371-2-013-998港澳台灣同鄉慈善基金會有限公司
【2010 HMTCF ~ Angel Care ~ Students Assistantship Projects】

Application Procedure

A. Objective and History
In order to help needy university students in the pursuit of knowledge and truth, our V. C. Lady, Angelique Yeh, started these Projects with the generous support of other donors. By providing financial assistance, we hope that students who benefit today will contribute to the society and create a better world in their future.
※ Since 2007, a total of over 768 students, children & patients from the Mainland of China, Hong Kong, Macau and Taiwan have received benefit.

B. Application period: 12 May 2010 ~ 8 Oct 2010

C. Assistantship Amount
- Hong Kong student: HKD 5,000 each
- Macau student: MOP 5,000 each
- Taiwan student: TWD 10,000 each
- Singapore student: SGD 1,000 each
- The Mainland China student: CNY 2,000 each

D. Eligibility Criteria
Students come from low-income families or families with sudden adversity. Studying in university or research institution in Hong Kong, Macau, Taiwan, Singapore & the Mainland of China.

E. Documentation for Application
1. All forms can be downloaded from our websites www.hmtcf.org.
2. Only email applications with attached files are accepted: 2010.HMTCF.Angel.Care.Projects@gmail.com
3. Student Assistantship application forms: (A) (B) (C) + a copy of the latest transcript and two recommendations by two teachers from the institution which the applicant is studying in & pictures of the applicant taken with the two teachers.
   (Freshmen can have one recommendation written from a teacher in their previous school)
4. Applicants will receive a confirmation code within 10 days.

F. Selection Process
- Oct. 11~30: The Selection Committee will read and verify all applicants documentation.
- Nov. 1~26: The Selection Committee will review and re-verify applications documentation, and determined the finalist.
- Dec. 8: Announce the list of confirmation codes of the finalists.

G. Release of Assistantship
Each university and institution will release the assistantship to our selected students according to their own procedures in the second semester. (which included amount within our exist donated fund.)

Any enquiry please contact E-mail: 2010.HMTCF.Angel.Care.Projects@gmail.com
**HK & MACAU TAIWANESE CHARITY FUND LIMITED**

【2010 HMTCF ~Angel Care ~ Students Assistantship Projects】Form (A)

<table>
<thead>
<tr>
<th>University</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major</td>
<td>Student No.</td>
</tr>
</tbody>
</table>

**Personal Skills:**

<table>
<thead>
<tr>
<th>Chinese Name</th>
<th>English Name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of Birth(D/M/Y)</th>
<th>Place of Birth</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Tel(H)</th>
<th>Mobile</th>
<th>E-Mail</th>
</tr>
</thead>
</table>

**Guardian’s Address:**

**Address:**

**Family Members:** Total ________ persons

<table>
<thead>
<tr>
<th>Relation</th>
<th>Name</th>
<th>Occupation</th>
<th>Company</th>
<th>Position</th>
<th>Current Situation / Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Whole Family Financial Situation:**

- □ CNY  □ SGD  □ TWD  □ HKD  □ MOP

1. Annual family income $ ____________ family lives in □ own property □ rented apartment

2. Applicant lives in □ own property □ rented □ university dormitory / monthly cost $ ____________

3. Are you working? □ No □ Yes, job as __________________ monthly income $ ____________

4. Do you receive any student loan? □ No □ Yes, loan outstanding $ ____________

5. Do you receive any other grants and/or scholarships? □ Yes Name of grant / loan received: ______________________ Total amount $ ____________

---

I declare that the information provided above is truly stated, and I agree to have the information passed to related parties only for assistantship consideration purposes.

**Applicant Signature:** __________________________ 
**Date:** __________________________
HK & MACAU TAIWANESE CHARITY FUND LIMITED
【2010 HMTCF ~ Angel Care ~ Students Assistantship Projects】Form (B)

Part I: Personal Information of Applicant

Name: (E) ____________________________ Name: (C) ____________________________ Sex: M [ ] F [ ]

Date of Birth (D/M/Y): ___________ Tel: ___________ Email: ________________________________

School: ___________________________ Major: ___________ Student/No.: ________________ Year: ___

Home Address:
____________________________________________________________________________________________

Part II: The Last School Term Transcript Copy

Part III: Two Photos - one of yourself & one with the lecturers who are recommending you.

Part IV: For School Use Only

Recommendation:

__________________________________________________________
Signature of Lecturer: ____________________________ Name: ____________________________

E-Mail: ____________________________ Title: ____________________________

School/Department: ____________________________ Date: ____________________________
Part V: Please explain why you need this assistantship and how it can help you.

Please enter your explanation below in English.
Name: (E) ___________________________ Name: (C) ______________________ Sex: M [ ] F [ ]

Tel: ___________________ Email: ____________________________________________

School, Major, Year, SID: ______________________________________________________________________

Q: We would like to hear from you about what you think about the aims of our projects ~

Please also tell us about your future plans, goals & dreams ~

I. Aim & History:

In order to help needy university students in the pursuit of knowledge and truth, our V. C. Lady, Angelique Yeh, started these Student Assistantship Projects together with the generous support of various other donors. By providing financial assistance, we hope that students who benefit today will contribute to the society and create a better world in their future.