

2026/2027 School Year

- General application
- Out-of-period application

Applicant Family Unit No. (Filled in by DSEDJ staff): \_\_\_\_\_

Part One: Applicant Family Unit Information						
<b>I. Information on the composition of the family unit: Please provide the total number of members in the family unit, and fill in their information (including student applicants) below, and all members of the family unit must sign their names. Family members shall confirm their consent by signing on the first page, and the representative of the family unit shall initial on each subsequent page (i.e. all pages other than the first). *If a family member is under the age of 18, the signature shall be made on his/her behalf by the parent or guardian. The family representative shall be a parent or guardian of the student applicant, or the student applicant himself/herself if he/she has reached the age of majority.</b>						No. of family members  _____
No.	Name	Identity document no.	Are you a student applicant? If 'Yes', please choose the scheme(s) for application (multiple selections allowed)			Signature (same as on the identity document)
1. (Representative of the family unit)			<input type="checkbox"/> Yes ( <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy) <input type="checkbox"/> No			
2.			<input type="checkbox"/> Yes ( <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy) <input type="checkbox"/> No			
3.			<input type="checkbox"/> Yes ( <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy) <input type="checkbox"/> No			
4.			<input type="checkbox"/> Yes ( <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy) <input type="checkbox"/> No			
5.			<input type="checkbox"/> Yes ( <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy) <input type="checkbox"/> No			
6.			<input type="checkbox"/> Yes ( <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy) <input type="checkbox"/> No			
7.			<input type="checkbox"/> Yes ( <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy) <input type="checkbox"/> No			
8.			<input type="checkbox"/> Yes ( <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy) <input type="checkbox"/> No			
9.			<input type="checkbox"/> Yes ( <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy) <input type="checkbox"/> No			
10. <small>Note 1</small>			<input type="checkbox"/> Yes ( <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy) <input type="checkbox"/> No			
Note 1: If there are more than 10 members in the family unit, please print this section yourself and fill it out.						
<b>*According to the provisions of Article 244 of Código Penal ('Penal Code'), forgery of documents, once convicted, will lead to imprisonment of up to 3 years or a fine. According to the provisions of Article 250 of Código Penal ('Penal Code'), using a false certificate, once convicted, will lead to imprisonment of up to 1 year or a fine of up to 120 days.</b>						
<b>II. Basic information of the family unit (the representative of the family unit shall be a parent or guardian of the student applicant, or the student applicant himself/herself if he/she has reached the age of majority).</b>						
Chinese name (Representative of the family unit)		Name in foreign language or transliteration (Representative of the family unit)				
Email		Mobile phone no.		Correspondence language (The language in which notifications are to be received)	<input type="checkbox"/> Chinese <input type="checkbox"/> Portuguese <input type="checkbox"/> English	
Residential information	Region	<input type="checkbox"/> Macao <input type="checkbox"/> Chinese mainland (excluding Guangdong-Macao In-Depth Cooperation Zone in Hengqin) <input type="checkbox"/> Guangdong-Macao In-Depth Cooperation Zone in Hengqin <input type="checkbox"/> Other (please specify): _____	Housing type	<input type="checkbox"/> Social housing (rented from the Housing Bureau) <input type="checkbox"/> Rental property (private rental) <input type="checkbox"/> Self-owned property (includes Economic Housing bought from the Housing Bureau, etc.) <input type="checkbox"/> Other (please specify): _____	Current monthly rent or mortgage payment <small>Note 2</small>	Currency: _____ Amount: _____
	Address					
Is the family unit receiving <b>financial assistance</b> from the Social Welfare Bureau? (financial assistance includes: general subsidy, non-regular subsidy and special subsidy) (If 'Yes', you must provide <i>Cartão de identificação de beneficiário</i> ('Financial Assistance Beneficiary Card') issued by the Social Welfare Bureau or relevant supporting documents)					<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this application made by a <b>residential care facility as the student applicant's legal guardian</b> ? (If 'Yes', you must provide supporting documents issued by the person-in-charge of the facility)					<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>III. Information on bank account for receiving the subsidy</b> (a Macao pataca bank account of a parent or a guardian of the student, or of the student, opened at a bank in the Macao Special Administrative Region)						
Bank name		Account holder				
Bank account no.						

Note 2: Except for social housing residents, proof of mortgage or rent payment must be submitted.

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Part Two: Income Information of the Applicant Family Unit

(\*If the table below does not have enough space for you to cover all income sources or relevant information on all members in the family unit, please print this section yourself.)

➤ **General application:**

**IV. Income earned by members of the family unit in and outside Macao**

**Types of incomes:**

A: Incomes gained from work (including incomes gained from self-employment, employment, and/or industrial and commercial activities)

B: Grants (including assistance grants, retirement pensions, military pensions, etc.)

C: Other incomes (including incomes gained from real estate, copyrights, financial management, etc.)

(1) The Education Fund will obtain information regarding **work income in Macao** through data interconnection with the Financial Services Bureau; no separate proof is required. If the information cannot be obtained through data interconnection with the Financial Services Bureau, the Fund will notify the applicant to submit additional documentation.

(2) **Income from work outside Macao, as well as income from allowances, subsidies, or other sources both within and outside Macao, must be self-reported and supported by supporting documents** <sup>Note 3</sup>.

**V. Total bank deposits of the applicant family unit** <sup>Note 4</sup>

Proof of bank deposits exceeding MOP 1,500.00 owned by the members of the applicant family unit must be submitted, and the relevant records must be **updated to any date between 1 June and 31 July 2026**. Total bank deposits of the applicant family unit include but are not limited to current and fixed deposits, savings, stocks, bonds, commercial products, securities, funds, insurance plans with savings or investment components, etc., held in and outside Macao.

**VI. Real estate owned by the applicant family unit** <sup>Note 5</sup>

Proof of ownership of real estate for all family members; for real estate located **within Macao**, the Fund will obtain such information through data interconnection with the Financial Services Bureau. For real estate located **outside Macao**, corresponding **supporting documents must be provided**.

➤ **Out-of-period application:** Please complete and declare the information and financial status of all family members for the three months prior to submitting the application, and attach the corresponding supporting documents. If a family member holds bank deposits exceeding MOP 1,500.00, they must submit relevant documents **showing the most recent transaction date prior to the application submission**, in order to reflect the latest deposit status within the most recent three-month period.

<b>Family representative/member no. _____</b>				
Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit
ID type <sup>Note 6</sup>	<input type="checkbox"/> Macao Permanent Resident Card <input type="checkbox"/> Other (please specify): _____	ID no.		Gender
		Date of birth	____/____/____ (YYYY / MM / DD)	
<b>Please truthfully declare your financial status in and outside of Macao by checking ("✓") the appropriate box, and attach the relevant supporting documents. Failure to attach the required documents will be considered a failure to submit the relevant documents.</b>				
Income gained within Macao	<input type="checkbox"/> Yes (multiple selections allowed: <input type="checkbox"/> Incomes gained from work <input type="checkbox"/> Grants <input type="checkbox"/> Other incomes)			<input type="checkbox"/> No
Income gained outside Macao	<input type="checkbox"/> Yes (multiple selections allowed: <input type="checkbox"/> Incomes gained from work <input type="checkbox"/> Grants <input type="checkbox"/> Other incomes)			<input type="checkbox"/> No
Bank deposits exceeding MOP 1,500	<input type="checkbox"/> Yes			<input type="checkbox"/> No
Real estate owned	<input type="checkbox"/> Yes (Macao: No. of residences: ____; No. of parking spaces: ____; Outside Macao: No. of residences: ____; No. of parking spaces: ____) <input type="checkbox"/> No			
<b>Family member no. _____</b>				
Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit
ID type <sup>Note 6</sup>	<input type="checkbox"/> Macao Permanent Resident Card <input type="checkbox"/> Other (please specify): _____	ID no.		Gender
		Date of birth	____/____/____ (YYYY / MM / DD)	
<b>Please truthfully declare your financial status in and outside of Macao by checking ("✓") the appropriate box, and attach the relevant supporting documents. Failure to attach the required documents will be considered a failure to submit the relevant documents.</b>				
Income gained within Macao	<input type="checkbox"/> Yes (multiple selections allowed: <input type="checkbox"/> Incomes gained from work <input type="checkbox"/> Grants <input type="checkbox"/> Other incomes)			<input type="checkbox"/> No
Income gained outside Macao	<input type="checkbox"/> Yes (multiple selections allowed: <input type="checkbox"/> Incomes gained from work <input type="checkbox"/> Grants <input type="checkbox"/> Other incomes)			<input type="checkbox"/> No
Bank deposits exceeding MOP 1,500	<input type="checkbox"/> Yes			<input type="checkbox"/> No
Real estate owned	<input type="checkbox"/> Yes (Macao: No. of residences: ____; No. of parking spaces: ____; Outside Macao: No. of residences: ____; No. of parking spaces: ____) <input type="checkbox"/> No			
<b>Family member no. _____</b>				
Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit
ID type <sup>Note 6</sup>	<input type="checkbox"/> Macao Permanent Resident Card <input type="checkbox"/> Other (please specify): _____	ID no.		Gender
		Date of birth	____/____/____ (YYYY / MM / DD)	
<b>Please truthfully declare your financial status in and outside of Macao by checking ("✓") the appropriate box, and attach the relevant supporting documents. Failure to attach the required documents will be considered a failure to submit the relevant documents.</b>				
Income gained within Macao	<input type="checkbox"/> Yes (multiple selections allowed: <input type="checkbox"/> Incomes gained from work <input type="checkbox"/> Grants <input type="checkbox"/> Other incomes)			<input type="checkbox"/> No
Income gained outside Macao	<input type="checkbox"/> Yes (multiple selections allowed: <input type="checkbox"/> Incomes gained from work <input type="checkbox"/> Grants <input type="checkbox"/> Other incomes)			<input type="checkbox"/> No
Bank deposits exceeding MOP 1,500	<input type="checkbox"/> Yes			<input type="checkbox"/> No
Real estate owned	<input type="checkbox"/> Yes (Macao: No. of residences: ____; No. of parking spaces: ____; Outside Macao: No. of residences: ____; No. of parking spaces: ____) <input type="checkbox"/> No			
<b>Family member no. _____</b>				
Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit
ID type <sup>Note 6</sup>	<input type="checkbox"/> Macao Permanent Resident Card <input type="checkbox"/> Other (please specify): _____	ID no.		Gender
		Date of birth	____/____/____ (YYYY / MM / DD)	
<b>Please truthfully declare your financial status in and outside of Macao by checking ("✓") the appropriate box, and attach the relevant supporting documents. Failure to attach the required documents will be considered a failure to submit the relevant documents.</b>				
Income gained within Macao	<input type="checkbox"/> Yes (multiple selections allowed: <input type="checkbox"/> Incomes gained from work <input type="checkbox"/> Grants <input type="checkbox"/> Other incomes)			<input type="checkbox"/> No
Income gained outside Macao	<input type="checkbox"/> Yes (multiple selections allowed: <input type="checkbox"/> Incomes gained from work <input type="checkbox"/> Grants <input type="checkbox"/> Other incomes)			<input type="checkbox"/> No
Bank deposits exceeding MOP 1,500	<input type="checkbox"/> Yes			<input type="checkbox"/> No
Real estate owned	<input type="checkbox"/> Yes (Macao: No. of residences: ____; No. of parking spaces: ____; Outside Macao: No. of residences: ____; No. of parking spaces: ____) <input type="checkbox"/> No			

Note 3: Proof of income must be submitted, such as the Declarations of Income ([Employed] [Self-employed] [Business operator]), the payment records of social security benefits, etc.

Note 4: All declared items must be supported by documentary evidence, such as asset certificates issued by credit or financial institutions, bank statements of personal total net assets, etc., and the update date of the relevant records must comply with the provisions of Point 4.5.3 of the Tuition Assistance, Meal Subsidy and School Supplies Subsidy Scheme.

Note 5: For properties and real estate located outside Macao, proof of ownership, such as a real estate ownership certificate, must be submitted.

Note 6: Copies of identification documents for all family members must be submitted. However, if a student applicant has already registered with the DSEDJ, they are not required to submit a copy of their identity document. In addition, if a family unit member holds a Non-resident Worker's Identity Card, a copy of such card must also be submitted.

Initial signature of the representative of the family unit: \_\_\_\_\_ Date: \_\_\_\_\_(YYYY/MM/DD)

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**Part Three: Special Circumstances**

**VII. Any special circumstances that have arisen within the family or household in the past three months**

Special circumstances: Those who are receiving financial assistance from the Social Welfare Bureau before applying or whose family unit's financial situation has been affected by unexpected circumstances happening to the family members within the past 3 months, in particular:

- A. In a state of single parenting;
- B. Death;
- C. Public disaster or natural disaster;
- D. In a state of involuntary unemployment as referred to in Clause 2 of Article 39 of Law No. 4/2010 *Regime da Segurança Social* ('Social Security System');
- E. Suffering from illnesses as referred to in Clause 1 of Article 4 of Dispatch of Secretary for Social Affairs and Culture No. 18/2003 *Regulamento Especial para as Famílias em Situação Vulnerável* ('Regulations on Special Assistance for Disadvantaged Families') and diseases referred to in Items (2) to (7) of Clause 2 of Article 3 of *Regulamento do Programa de Inclusão e Harmonia na Comunidade* ('Regulations for the Community Inclusion and Harmony Programme') approved by Dispatch of Secretary for Social Affairs and Culture No. 24/2022.

➤ General application:

**For applicants who are facing special circumstances referred to in Point 2.5 of the Tuition Assistance, Meal Subsidy and School Supplies Subsidy Scheme, the Administration and Management Committee of the Education Fund may consider accepting the application from a family unit that exceeds the limits referred to in Point 3.2.**

➤ Out-of-period application:

**Applicants who are facing special circumstances referred to in Point 2.5 of the Tuition Assistance, Meal Subsidy and School Supplies Subsidy Scheme, and who meet the requirements specified in Point 3 of the Scheme may submit an out-of-period application between 1 September 2026 and 30 April 2027. Out-of-period applicants must provide proof that the family unit was receiving financial assistance from the Social Welfare Bureau prior to submitting the application, or that they have encountered financial difficulties due to unforeseen circumstances within the past three months, and must submit the supporting documents specified in Point 10.3 of the scheme.**

**Please truthfully declare any unexpected events that have occurred to the family unit within the most recent three months by checking ("✓") in the appropriate box, and attach the corresponding supporting documents. Failure to attach the required documents or submission of documents that do not meet the requirements will result in the event not being considered as a special circumstance.**

Yes <sup>Note7</sup>

No

- In a state of single parenting. Date of the incident: \_\_\_\_/\_\_\_\_/\_\_\_\_(YYYY / MM / DD)
- Death. Date of the incident: \_\_\_\_/\_\_\_\_/\_\_\_\_(YYYY / MM / DD)
- Public disaster or natural disaster. Date of the incident: \_\_\_\_/\_\_\_\_/\_\_\_\_(YYYY / MM / DD)
- In a state of involuntary unemployment. Date of the incident: \_\_\_\_/\_\_\_\_/\_\_\_\_(YYYY / MM / DD)
- Suffering from a serious illness <sup>Note8</sup>. Date of the incident: \_\_\_\_/\_\_\_\_/\_\_\_\_(YYYY / MM / DD) (please provide details):
- Other. Date of the incident: \_\_\_\_/\_\_\_\_/\_\_\_\_(YYYY / MM / DD) (please provide details):

Note 7: Submit documents, information, or supplementary explanations that help assess your family's financial situation, such as court judgments, death certificates, certificates of involuntary unemployment benefits issued by the Labour Affairs Bureau, medical certificates, medical records, or medical reports.

Note 8: Serious illnesses include: long-term mental illness, moderate to severe anaemia (haemoglobin levels of 9 grams or lower), malignant tumours, diabetes and its complications, dysfunction of vital organs, disseminated lupus erythematosus, tuberculosis (under treatment), need for a liquid diet, ostomy-related problems, cerebrovascular diseases, Parkinson's disease, AIDS, epilepsy, dementia, and autism.

**Part Four: Statement and Agreement**

1. Before filling out and signing this application form, I/we have read the 'Tuition Assistance, Meal Subsidy and School Supplies Subsidy Scheme' (hereinafter referred to as the 'Scheme') and the Application Form for Tuition Assistance, Meal Subsidy and School Supplies Subsidy (hereinafter referred to as the 'Application Form') carefully.
2. I/We acknowledge that I/we must submit to the Education Fund the Application Form which has been appropriately filled in and signed, as well as relevant proof documents.
3. I/We understand that according to *Lei da Protecção de Dados Pessoais* ('Personal Data Protection Law'), the data collected in this application will only be used for processing this application, as well as for statistical and research purposes.
4. I/We agree that the Education Fund obtains the information required for assessing the application from other governmental departments and public institutions in Macao, and agree to any government departments (including but not limited to the Financial Services Bureau, Identification Services Bureau, Social Welfare Bureau and Housing Bureau) and public institutions providing the personal data of the family members to the Education Fund for data review, comparison and verification purposes.
5. I/We promise to fulfil the obligations of the Scheme, and acknowledge that the information submitted and declared to the Education Fund must be true and correct, and that there is no concealment of information that needs to be filled in, nor any misleading or confusing information provided.
6. I/We acknowledge that if I/we violate the obligations stipulated in Point 13 of the Scheme, I/we shall bear the consequences of violating the obligations as stipulated in Point 14 of the Scheme.
7. I/We confirm that I/we have carefully reviewed all the contents in this application form and have signed to confirm this on the first page under the section 'Information on the composition of the family unit'; the remaining pages have been signed by the representative of the family unit on behalf of all members in the family unit.

Initial signature of the representative of the family unit: \_\_\_\_\_ Date: \_\_\_\_\_(YYYY/MM/DD)