

- General application  
 Out-of-period application

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

**Part One: 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 the *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 my/our 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 12 of the 'Scheme', I/we shall bear the consequences of violating the obligations as stipulated in Point 13 of the 'Scheme'.
7. I/We acknowledge the contents provided in this 'Application Form' and agree that, for confirmation purposes, full signature(s) should be appended to the first page, and each page (except for the first page) should be initialed by the representative of the family unit; for any person under the age of 18, his/her parent or guardian must sign on his/her behalf.

**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 (\*If a family member is under 18 years old, his/her parent or guardian should sign on his/her behalf).**

No. of family members \_\_\_\_\_

No.	Name	Identity document no.	Signature (same as on the identity document)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

**\*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.**

**Part Two: Personal Information about Members of the Applicant Family Unit**

(\*If there are more than 3 members in the family unit, please use the 'Supplementary Sheet for Part Two')

**I. Information on the representative of the family unit (No.1 — Representative of the family unit)\*. One of the parents or guardians of minor students should be the representative of the family unit; an adult student should be the representative himself/herself.**

Chinese name		Name in foreign language or transliteration	
Item(s) for application	Are you a student applicant? <input type="checkbox"/> Yes → (Select the item(s) you are applying for) <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy <input type="checkbox"/> No		
ID type <sup>Note 1</sup>	<input type="checkbox"/> Macao Permanent Resident Identity Card <input type="checkbox"/> Macao Non-Permanent Resident Identity Card <input type="checkbox"/> Other (Please specify): _____	ID no.	
		Date of birth	( Y Y Y Y / M M / D D )
Mobile phone no.		Email (optional)	
Residential information	Region	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): _____
	<input type="checkbox"/> Macao <input type="checkbox"/> Taipa <input type="checkbox"/> Coloane <input type="checkbox"/> Other (Please specify): _____		
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, and <b>you do not need to fill in Part Three and Part Four of this form.</b> )			<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, and <b>you do not need to fill in Part Three and Part Four of this form.</b> )			<input type="checkbox"/> Yes <input type="checkbox"/> No

**II. Information on bank account for receiving the subsidy** (A Macao pataca bank account of one of the parents or 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.			

**III. Information on other members in the family unit****Family member no. 2**

Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit	
Item(s) for application	Are you a student applicant? <input type="checkbox"/> Yes → (Select the item(s) you are applying for) <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy <input type="checkbox"/> No				
ID type <sup>Note 1</sup>	<input type="checkbox"/> Macao Permanent Resident Identity Card <input type="checkbox"/> Macao Non-Permanent Resident Identity Card <input type="checkbox"/> Other (Please specify): _____	ID no.		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
		Date of birth	( Y Y Y Y / M M / D D )		

**Family member no. 3**

Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit	
Item(s) for application	Are you a student applicant? <input type="checkbox"/> Yes → (Select the item(s) you are applying for) <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy <input type="checkbox"/> No				
ID type <sup>Note 1</sup>	<input type="checkbox"/> Macao Permanent Resident Identity Card <input type="checkbox"/> Macao Non-Permanent Resident Identity Card <input type="checkbox"/> Other (Please specify): _____	ID no.		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
		Date of birth	( Y Y Y Y / M M / D D )		

Note 1: Family members holding a non-Macao resident identity card must submit a copy of their ID document.

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

Initial signature of the representative of the family unit: \_\_\_\_\_ Date: \_\_\_\_\_

**Part Three: 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 use the ‘Supplementary Sheet for Part Three’.)

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

- **General application:** Please fill in the family unit’s incomes gained in the last calendar year (between 1 January and 31 December of last year). If the incomes are gained from outside Macao or are non-work incomes gained in Macao, you must fill in this part and provide relevant supporting documents.
- **Out-of-period application:** Fill in the income information for the last three months prior to this application and provide relevant supporting documents.

**Types of incomes:**

- Incomes gained from work (including incomes gained from self-employment, employment, and/or industrial and commercial activities)
- Grants (including assistance grants, retirement pensions, military pensions, etc.)
- Other incomes (including incomes gained from real estates, copyrights, financial management, etc.)

<b>No.1—Representative of the family unit Name</b>		<b>Does this member have income?</b>	<input type="checkbox"/> Yes (Please continue filling in this section) <input type="checkbox"/> No (Please skip this section and fill in the income info of the next family member)		
Only choose one from the two options (If you only have income from work in Macao, you must choose either of the below options.) <input type="checkbox"/> This member chooses to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member does not need to fill in this section and does not need to submit relevant supporting documents. (For general applications only) <input type="checkbox"/> This member chooses not to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member needs to fill in this section and needs to submit relevant supporting documents <sup>Note 3</sup> . (For general applications only)					
Income source region	Type of income	Company name / source of income	Period	Currency	Amount
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		

<b>Family member no. 2 Name</b>		<b>Does this member have income?</b>	<input type="checkbox"/> Yes (Please continue filling in this section) <input type="checkbox"/> No (Please skip this section and fill in the income info of the next family member)		
Only choose one from the two options (If you only have income from work in Macao, you must choose either of the below options.) <input type="checkbox"/> This member chooses to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member does not need to fill in this section and does not need to submit relevant supporting documents. (For general applications only) <input type="checkbox"/> This member chooses not to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member needs to fill in this section and needs to submit relevant supporting documents <sup>Note 3</sup> . (For general applications only)					
Income source region	Type of income	Company name / source of income	Period	Currency	Amount
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		

<b>Family member no. 3 Name</b>		<b>Does this member have income?</b>	<input type="checkbox"/> Yes (Please continue filling in this section) <input type="checkbox"/> No (Please skip this section and fill in the income info of the next family member)		
Only choose one from the two options (If you only have income from work in Macao, you must choose either of the below options.) <input type="checkbox"/> This member chooses to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member does not need to fill in this section and does not need to submit relevant supporting documents. (For general applications only) <input type="checkbox"/> This member chooses not to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member needs to fill in this section and needs to submit relevant supporting documents <sup>Note 3</sup> . (For general applications only)					
Income source region	Type of income	Company name / source of income	Period	Currency	Amount
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		

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. If you choose this option but do not fill in the required information or submit relevant supporting documents, your application will be deemed incomplete.

Initial signature of the representative of the family unit: \_\_\_\_\_ Date: \_\_\_\_\_

**Part Four: Assets Owned by the Applicant Family Unit and Other Documents**  
 (\*If the table below does not have enough space for you to fill in all the bank deposit items, properties and real estates, or special circumstances faced by the family unit within the last 3 months, please use the 'Supplementary Sheet for Part Four'.)

<b>V. Total bank deposits of the applicant family unit</b> <sup>Note 4</sup> (Proof of bank deposits exceeding MOP\$1,500.00 owned by the members of the applicant family unit, including but 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.)		<input type="checkbox"/> <b>Applicable</b> (Please fill in this section) <input type="checkbox"/> <b>Not applicable</b> (Please skip to section VI 'Properties and real estates owned by the applicant family unit')		
No.	Item	Name of the bank / financial institution	Currency	Amount
1	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
2	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
3	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
4	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
5	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
6	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
7	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
8	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
9	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
10	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
11	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
12	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			

Note 4: Supporting documents must be submitted for all items declared, such as asset certification documents issued by the credit or financial institutions, documents showing personal total bank net asset value, etc., and information as at the last updated date shall prevail.

<b>VI. Properties and real estates owned by the applicant family unit</b> <sup>Note 5</sup> (Including owned residences, parking spaces, commercial units, industrial units and offices)		<input type="checkbox"/> <b>Applicable</b> (Please fill in this section) <input type="checkbox"/> <b>Not applicable</b> (Please skip to section VII Other information beneficial to the application)	
No.	Category	Location	Property registration number/address
1	<input type="checkbox"/> Residence <input type="checkbox"/> Parking space <input type="checkbox"/> Commercial unit <input type="checkbox"/> Industrial unit <input type="checkbox"/> Office <input type="checkbox"/> Other:_____	<input type="checkbox"/> Macao <input type="checkbox"/> Other:_____	
2	<input type="checkbox"/> Residence <input type="checkbox"/> Parking space <input type="checkbox"/> Commercial unit <input type="checkbox"/> Industrial unit <input type="checkbox"/> Office <input type="checkbox"/> Other:_____	<input type="checkbox"/> Macao <input type="checkbox"/> Other:_____	
Total	No. of residences: ___; No. of parking spaces: ___; No. of commercial units: ___; No. of industrial units: ___; No. of offices ___; Other(_____): ___.		

Note 5: If the properties and real estates are outside Macao, proof, such as real estate certificates, etc., must be submitted.

<b>VII. Special circumstances faced by the family unit within the last 3 months</b>	<input type="checkbox"/> <b>Applicable</b> (Please fill in this section) <input type="checkbox"/> <b>Not applicable</b> (No need to fill in this section)
<input type="checkbox"/> Public disasters or natural disasters <span style="margin-left: 200px;"><input type="checkbox"/>In a state of single parenting</span> <input type="checkbox"/> The breadwinner of the family is in a state of involuntary unemployment <span style="margin-left: 100px;"><input type="checkbox"/>The breadwinner of the family has died</span> <input type="checkbox"/> The breadwinner of the family is suffering from a serious illness <sup>Note 6</sup> (Please specify):  <input type="checkbox"/> Other (Please specify):	

Note 6: 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.

Initial signature of the representative of the family unit: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Supplementary Sheet for Part Two — Personal Information about Members of the Applicant Family Unit</b> (*Fill in this section only if there are more than 3 members in the family unit.)					
<b>Family member no.</b> _____					
Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit	
Item(s) for application	Are you a student applicant? <input type="checkbox"/> Yes → (Select the item(s) you are applying for) <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy <input type="checkbox"/> No				
ID type <small>Note 1</small>	<input type="checkbox"/> Macao Permanent Resident Identity Card <input type="checkbox"/> Macao Non-Permanent Resident Identity Card <input type="checkbox"/> Other (Please specify): _____	ID no.		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
		Date of birth	( YYYY / MM / DD )		
<b>Family member no.</b> _____					
Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit	
Item(s) for application	Are you a student applicant? <input type="checkbox"/> Yes → (Select the item(s) you are applying for) <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy <input type="checkbox"/> No				
ID type <small>Note 1</small>	<input type="checkbox"/> Macao Permanent Resident Identity Card <input type="checkbox"/> Macao Non-Permanent Resident Identity Card <input type="checkbox"/> Other (Please specify): _____	ID no.		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
		Date of birth	( YYYY / MM / DD )		
<b>Family member no.</b> _____					
Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit	
Item(s) for application	Are you a student applicant? <input type="checkbox"/> Yes → (Select the item(s) you are applying for) <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy <input type="checkbox"/> No				
ID type <small>Note 1</small>	<input type="checkbox"/> Macao Permanent Resident Identity Card <input type="checkbox"/> Macao Non-Permanent Resident Identity Card <input type="checkbox"/> Other (Please specify): _____	ID no.		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
		Date of birth	( YYYY / MM / DD )		
<b>Family member no.</b> _____					
Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit	
Item(s) for application	Are you a student applicant? <input type="checkbox"/> Yes → (Select the item(s) you are applying for) <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy <input type="checkbox"/> No				
ID type <small>Note 1</small>	<input type="checkbox"/> Macao Permanent Resident Identity Card <input type="checkbox"/> Macao Non-Permanent Resident Identity Card <input type="checkbox"/> Other (Please specify): _____	ID no.		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
		Date of birth	( YYYY / MM / DD )		
<b>Family member no.</b> _____					
Chinese name		Name in foreign language or transliteration		Relationship with the representative of the family unit	
Item(s) for application	Are you a student applicant? <input type="checkbox"/> Yes → (Select the item(s) you are applying for) <input type="checkbox"/> Tuition Assistance <input type="checkbox"/> Meal Subsidy <input type="checkbox"/> School Supplies Subsidy <input type="checkbox"/> No				
ID type <small>Note 1</small>	<input type="checkbox"/> Macao Permanent Resident Identity Card <input type="checkbox"/> Macao Non-Permanent Resident Identity Card <input type="checkbox"/> Other (Please specify): _____	ID no.		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
		Date of birth	( YYYY / MM / DD )		

Note 1: Family members holding a non-Macao resident identity card must submit a copy of their ID document.

Initial signature of the representative of the family unit: \_\_\_\_\_ Date: \_\_\_\_\_

**Supplementary Sheet for Part Three — Income Information of the Applicant Family Unit**  
 (\*Fill in this section only if any family member has more than 3 income items, or if there are more than 3 members in the family unit.)

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

- **General application:** Please fill in the family unit’s incomes gained in the last calendar year (between 1 January and 31 December of last year). If the incomes are gained from outside Macao or are non-work incomes gained in Macao, you must fill in this part and provide relevant supporting documents.
- **Out-of-period application:** Fill in the income information for the last three months prior to this application and provide relevant supporting documents.

**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 estates, copyrights, financial management, etc.)

<b>Family member no. ___ Name</b>		<b>Does this member have income?</b>	<input type="checkbox"/> <b>Yes</b> (Please continue filling in this section) <input type="checkbox"/> <b>No</b> (Please skip this section and fill in the income info of the next family member)		
Only choose one from the two options (If you only have income from work in Macao, you must choose either of the below options.) <input type="checkbox"/> This member chooses to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member does not need to fill in this section and does not need to submit relevant supporting documents. (For general applications only) <input type="checkbox"/> This member chooses not to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member needs to fill in this section and needs to submit relevant supporting documents <sup>Note 3</sup> . (For general applications only)					
Income source region	Type of income	Company name / source of income	Period	Currency	Amount
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		

<b>Family member no. ___ Name</b>		<b>Does this member have income?</b>	<input type="checkbox"/> <b>Yes</b> (Please continue filling in this section) <input type="checkbox"/> <b>No</b> (Please skip this section and fill in the income info of the next family member)		
Only choose one from the two options (If you only have income from work in Macao, you must choose either of the below options.) <input type="checkbox"/> This member chooses to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member does not need to fill in this section and does not need to submit relevant supporting documents. (For general applications only) <input type="checkbox"/> This member chooses not to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member needs to fill in this section and needs to submit relevant supporting documents <sup>Note 3</sup> . (For general applications only)					
Income source region	Type of income	Company name / source of income	Period	Currency	Amount
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		

<b>Family member no. ___ Name</b>		<b>Does this member have income?</b>	<input type="checkbox"/> <b>Yes</b> (Please continue filling in this section) <input type="checkbox"/> <b>No</b> (Please skip this section and fill in the income info of the next family member)		
Only choose one from the two options (If you only have income from work in Macao, you must choose either of the below options.) <input type="checkbox"/> This member chooses to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member does not need to fill in this section and does not need to submit relevant supporting documents. (For general applications only) <input type="checkbox"/> This member chooses not to allow DSEDJ to obtain the required info through data interconnection with the Financial Services Bureau, so this member needs to fill in this section and needs to submit relevant supporting documents <sup>Note 3</sup> . (For general applications only)					
Income source region	Type of income	Company name / source of income	Period	Currency	Amount
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		
<input type="checkbox"/> Macao <input type="checkbox"/> Other: _____	<input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c		____/____ to ____/____ (YYYY / MM) (YYYY / MM)		

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. If you choose this option but do not fill in the required information or submit relevant supporting documents, your application will be deemed incomplete.

Initial signature of the representative of the family unit: \_\_\_\_\_ Date: \_\_\_\_\_

**Supplementary Sheet for Part Four — Assets Owned by the Applicant Family Unit and Other Documents**

(\*Fill in this section only if there are more than 12 deposit items or more than 2 items of properties and real estates, or if the family unit has been facing many special circumstances in the last 3 months.)

**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, including but 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.)

No.	Item	Name of the bank / financial institution	Currency	Amount
13	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
14	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
15	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
16	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
17	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
18	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
19	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
20	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
21	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
22	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
23	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
24	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			
25	<input type="checkbox"/> Current deposit <input type="checkbox"/> Fixed deposit <input type="checkbox"/> Stocks <input type="checkbox"/> Other:_____			

Note 4: Supporting documents must be submitted for all items declared, such as asset certification documents issued by the credit or financial institutions, documents showing personal total bank net asset value etc., and information as at the last updated date shall prevail.

**VI. Properties and real estates owned by the applicant family unit** <sup>Note 5</sup>

(Including owned residences, parking spaces, commercial units, industrial units and offices)

No.	Category	Location	Property registration number/address
1	<input type="checkbox"/> Residence <input type="checkbox"/> Parking space <input type="checkbox"/> Commercial unit <input type="checkbox"/> Industrial unit <input type="checkbox"/> Office <input type="checkbox"/> Other:_____	<input type="checkbox"/> Macao <input type="checkbox"/> Other:_____	
2	<input type="checkbox"/> Residence <input type="checkbox"/> Parking space <input type="checkbox"/> Commercial unit <input type="checkbox"/> Industrial unit <input type="checkbox"/> Office <input type="checkbox"/> Other:_____	<input type="checkbox"/> Macao <input type="checkbox"/> Other:_____	
Total	No. of residences: ___; No. of parking spaces: ___; No. of commercial units: ___; No. of industrial units: ___; No. of offices ___; Other(____): ___.		

Note 5: If the properties and real estates are outside Macao, proof, such as real estate certificates, etc., must be submitted.

**VII. Special circumstances faced by the family unit within the last 3 months**

Public disasters or natural disasters In a state of single parenting

The breadwinner of the family is in a state of involuntary unemployment The breadwinner of the family has died

The breadwinner of the family is suffering from a serious illness <sup>Note 6</sup> (Please specify):

Other (Please specify):

Note 6: 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.

Initial signature of the representative of the family unit: \_\_\_\_\_ Date: \_\_\_\_\_