

Healthy e-Generation Network
“Connect with the e-Generation” Campaign 2025/26

Counselling Service Application Form
(for Student or Parent Use)

To : TWGHs ICAPT
Room B, 10/F, Ming Tak Centre,
135-137 Tung Chau Street, Tai Kok Tsui, Kowloon
Tel no : 2827 1408 Fax no : 2877 9559

(1) Applicant's information

Name : _____ (Chinese) _____ (English)
Sex : _____ Applicant's identity : ☐ Student ☐ Parent Contact Number : _____
Name of School of the student : _____ Class : _____

(2) Applicant's concerns (Multiple options are possible) :

☐ Internet Addiction ☐ Cyberbullying ☐ Online social interaction crisis
☐ Online traps ☐ Online spending

Issue related to internet use: ☐ Family relationship ☐ Parenting skills ☐ Interpersonal relationship

☐ Emotion and stress ☐ Other: _____

☐ I agree TWGHs' staff to contact me for providing counselling service and/or parent mutual support groups (for parents in need only).

The personal information collected in this form serves only for the purpose of providing services by TWGHs. The information will be handled in accordance with Personal Data (Privacy) Ordinance.

Date of Application: _____ Applicant's signature: _____