



聖公會白約翰會督中學
S.K.H. BISHOP BAKER SECONDARY SCHOOL

新界 元朗 鳳攸南街十號
NO. 10 FUNG YAU SOUTH STREET, YUEN LONG, N.T.
TEL: 24754778-9 FAX NO.: 24799150



09.04.2024

Gifted Education: Joint School Artificial Intelligence Sharing Seminar
聯校人工智能分享會(LTP23/161)

Dear Parents/ Guardians,

Serving as a resource school of Hub D3 under the CLAP@JC program to promote life and career development of secondary school students, our school has planned to arrange a Joint School Artificial Intelligence(A.I.) Sharing Seminar for those who would like to learn about A.I. education in various local universities. We have invited guest speaker experienced in A.I. and alumni from seven band one schools who are pursuing the A.I.-related courses in universities to share the latest information about the A.I. programmes as well as the innovation they have gained in their studies. The captioned event with the details are as follows:

Date	4 th May, 2024 (SAT)
Time	9:45-13:00
Venue	School hall and classrooms
Content	1. Guest speaker shares the latest trends in A.I. learning and future careers. 2. Alumni from seven band one schools share their experiences in studying A.I. courses at the universities. Universities programmes cover Art and Design, Business and Finance, Computer Science, Engineering, Health Science, Science and Humanities etc.
Target group	S3 to S5 students who are interested in learning about the latest trends in AI education in tertiary institutions (30 places)
Person-in-charge	Ms. Man-ching CHENG (鄭晚晴副校長), Mr. Shing-fung WONG (黃丞鋒老師), Ms. Shuk-man MAK (麥淑雯老師)
Organizer	CLAP@JC Hub D3 and Careers Section

Should you have any queries, please contact Vice-Principal Man-ching CHENG or Mr. Shing-fung WONG by phone at 2475 4778 during office hours from 8:00 a.m. to 4:00 p.m. on weekdays.

Yours sincerely,



Mr. Lik-hak WONG, Principal

Date: _____

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Please put a '✓' into the appropriate box

Dear Principal:

I understand the details of the activity and am pleased to encourage my child to participate in it punctually. For the safety of my child, I would like to inform you about his/her health status (optional):

I appreciate your effort put in arranging the activity but DISAPPROVE his/her participation for the following reason(s) :

Class (Class no.): _____ ()

Parent/Guardian Name: _____

Student Name: _____

Parent/Guardian Signature: _____

Emergent Contact No.: _____

Please return the reply slip to Fanny Fan-ling CHING at school office.