

## 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



02.11.2023

## Gifted Education: Artificial Intelligence Programming Workshops 人工智能編程工作坊(LTP23/092)

Dear Parents/ Guardians,

With a view to providing holistic education for your child, our school has planned to arrange a series of STEAM (Science, Technology, Engineering, Art and Math) related artificial intelligence workshops. They are the S2 Project MAKER extended learning activities for the Peer Coaching Scheme group leaders. The captioned learning activities with the details are as follows:

carming activit	ties with the details are as follows:	
Date	14/11/2023, 8/12/2023 and 29/1/2024	
Time	15:30-17:30 (2 hours)	
Venue	Our school	
Course	1. Understand the power of cloud computing with Thunkable.	
Content	2. Practice no-code programming and make their own apps	
	3. Learn about data analytics	
	4. Personal vocab builder mobile app	
Fee	Nil, workshops are funded by CLAP@JC and Hong Kong Jockey Club	
Person-in-	Ms Man-ching CHENG(鄭晚晴副校長) and	
charge	Mr. Chun-hei SO(蘇俊熙先生)	
Organizer	Maker Bay Foundation, Jockey Club A.I. Community Innovation Programme	

Should you have any queries, please contact Vice-Principal Man-ching CHENG (鄭晚晴副校長) by phone at 2475 4778 during office hours from 8:00 to 16:00 on weekdays.

		Yours sincerely,
AND NOT NO AND AND AND AND AND AND	······································	Mr. Lik-hak WONG, Principal)
		Date:
	Gifted Education	n: Artificial Intelligence Programming Workshops
		人工智能編程工作坊(LTP23/092)
	It a '✓' into the appropriate b	ox 🗆
Dear Prin	ncipal:	
	I understand the details of punctually. For the safety of	the activity and am pleased to encourage my child to participate in it of my child, I would like to inform you about his/her health status (optional):
	I appreciate your effort put following reason(s):	in arranging the activity but <u>DISAPPROVE</u> his/her participation for the
Class (Cl	lass no.):( )	Parent/Guardian Name:
Student Name:		Parent/Guardian Signature:
		Emergent Contact No.:

Please return the reply slip to VP Man-ching CHENG at school office.