



<b>For Office Use ONLY</b>						
<b>Application No.</b>						
A						

## APPLICATION FOR ADMISSION AS VISITING STUDENT

Please use BLOCK LETTERS in English.

### PERSONAL INFORMATION

Please enter information in this section as shown on your HKID Card/Mainland ID Card/Passport. For applicants without HKID card, please fill in the Mainland ID Card No. or Passport No.

\* - indicates a required field.

Surname/  
Family Name (Eng)\*

Given Names (Eng)\*

Chinese Name 



 Sex\*  M = Male  
 F = Female

H.K. Identity Card No. 



 ( 



 ) Date of Birth\* 



 / 



 / 



  
Month Day Year

Mainland ID Card No.

Province/City   
(where you have your household registration) \_\_\_\_\_

Passport No. 



(for those without HKID/Mainland ID Card) Nationality\* \_\_\_\_\_

Do you hold one of the three documents below?\*

- Hong Kong Permanent Identity card ; or  Yes  No\*\*
- HKID card showing “the right to land” in Hong Kong; or
- One-way permit for entry to Hong Kong

\*\*If No, please indicate below which document you are holding for study in this year:

- I hold a Full-time Employment Visa / Work Permit (Expiry Date: \_\_\_\_\_ (DD/MM/YYYY)) which allows me to work and study in HK.
- I hold a Dependent Visa / Entry Permit (Expiry Date: \_\_\_\_\_ (DD/MM/YYYY)) and I was below 18 years old when my visa / entry permit was issued.
- I hold a Dependent Visa / Entry Permit (Expiry Date: \_\_\_\_\_ (DD/MM/YYYY)) and I was 18 years old or above when my visa / entry permit was issued.
- I hold a Visa / Entry Permit under the Immigration Arrangements for Non-local Graduates (IANG). (Expiry Date: \_\_\_\_\_ (DD/MM/YYYY))
- I need a Student Visa / Entry Permit to study in HK.

From the information given above, you are regarded as a Local / Non-local applicant. **For Office Use ONLY**

### ADDRESS AND PHONE

Correspondence Address\*

Postal Code (if applicable): 



 Country\*: \_\_\_\_\_

Mobile Phone No.\* 



 Home Phone No. 



 Office Phone No.

E-mail Address\*

### INFORMATION ON DISABILITY

Applicants with a disability please put a “Y” in the box below and state the nature and degree of disability. Otherwise, please put an “N”.\*

\_\_\_\_\_

All applicants will be considered on the same basis. The collection of information about the nature and degree of any disabilities will be used by the University to assess the provision of facilities to benefit students from the studies.

## EDUCATION BACKGROUND

Please provide information in reversed chronological order and attach copies of certificates and transcripts with explanatory notes. DO NOT attach original certificates.

Post-secondary Institute(s) Attended / Attending

Name of Institution	Country	Date (Month / Year)		Title of Award	Award Classification	(Expected) Date of Graduation (Month / Year)
		From	To			

Secondary School(s) Attended (for applicants applying for Sub-degree or Bachelor's degree programmes / modules only)

Name of Institution	Country	Entering		Leaving	
		Month / Year	Level	Month / Year	Level

## WORKING EXPERIENCE

Please provide information in reversed chronological order.

Date (Month / Year)		Name of School/Organisation	Position/Rank	Subjects Taught/Responsibilities
From	To			

## CHOICE OF PROGRAMME AND COURSE

<b>Attendance Period</b>	<input type="checkbox"/> Summer Term of the Academic Year: _____	<input type="checkbox"/> Semester 1 of the Academic Year: _____	<input type="checkbox"/> Semester 2 of the Academic Year: _____
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<b>Assessment</b>	<input type="checkbox"/> I will participate in all prescribed assessment tasks (e.g. assignments, examinations) in the course(s) listed below. <input type="checkbox"/> I choose not to take any assessment in the course(s) listed below and will be issued a certificate of attendance only. (Note: Your option on assessment indicated above is irrevocable.)
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Programme applied:		TO BE COMPLETED BY PROGRAMME OFFICE/ ACADEMIC DEPARTMENT	
Course Code	Course Title	Accept / Reject	Signature

### ADDITIONAL INFORMATION

Please provide any information which you think is relevant to the assessment of your application.

### DECLARATION

1. I declare that all the information given above in support of my application is to the best of my knowledge accurate and complete. I understand that any omission or misrepresentation of information will lead to disqualification of my application for admission and subsequent enrollment in the University.
2. I authorise The Education University of Hong Kong to:
  - (a) use my data as a basis for various types of processing in relation to my application;
  - (b) have my personal data transferred to the student record system of the University upon my admission to the programme;
  - (c) use my data (except all personal identifiers such as name, HKID number) for statistical and research purposes;
  - (d) obtain information about my public examination results, records of studies or professional qualifications from the relevant examination authorities, assessment bodies or academic institutions in Hong Kong and elsewhere if deemed appropriate; and
  - (e) use my data to carry out checks of my applications, and any records of my studies in the University and other institutions in Hong Kong and elsewhere if deemed appropriate.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

### APPLICATION FEE

Please stick the receipt of application fee below:

**Please stick here the original customer copy of the Deposit Slip or ATM Advice**