

THE UNIVERSITY OF HONG KONG

Personal Information Collection Statement

1. This is a statement to inform you of your rights under the Personal Data (Privacy) Ordinance.
2. Personal information is provided by you as an applicant through the completion of application forms designated for various purposes, e.g. for admission to a programme of study, for an exchange programme, for hall admissions, and for provision of facilities or services. Data collected are used specifically for the purposes prescribed in the application forms and will serve
 - a) as a basis for selection of applicants;
 - b) as evidence for verification of the applicant's examination results, academic records and other information; and
 - c) where applicable, as part of the applicant's official student records.

In the case of (c) above, information so incorporated into student files will be used for all purposes relating to the student's studies as required by the relevant regulations and procedures of the University.

3. Personal data will be kept confidential and handled by the University's staff members. The University may transfer some of the data to an agent or other persons appointed to undertake some of its academic and administrative functions.
4. Under the provisions of the Ordinance, you have the right to request the University to ascertain whether it holds your personal data, to be given a copy, and to apply for correction of the data, if deemed incorrect.
5. Applications for access to and correction of personal data should be made by using a special request form and on payment of a fee. Such applications as well as requests for information should be addressed to the Data Protection Officer, Registry, The University of Hong Kong.

Declaration

1. I have noted the general points pursuant to the Personal Data (Privacy) Ordinance.
2. I authorize the University of Hong Kong to use, check and process my data as required for my application. I accept that all the data in this form and those the University is authorized to obtain will be used for purposes related to the processing and administration of my application in the university context.
3. I authorize The University of Hong Kong to obtain, and the relevant examination authorities, assessment bodies or academic institutions in Hong Kong and elsewhere to release, any and all information about my public examination results, records of studies or professional qualifications, I also authorize the University to use my data in this form for the purpose of obtaining such information.
4. I understand that upon successful application, my data will become a part of my student record and may be used for all purposes as prescribed under relevant rules and regulations as well as attendant procedures, so long as I remain student of this University.
5. I declare that the information given in support of this application is accurate and complete. I understand that any misrepresentation will disqualify my application.

Signature _____

Date _____

THE UNIVERSITY OF HONG KONG

Postgraduate Diploma in Infectious Diseases

SUPPORTING DOCUMENTS ^

Please post the following required documents directly to the Department of Microbiology, The University of Hong Kong, T-19-026, 19/F, Block T, Queen Mary Hospital, Pokfulam, Hong Kong by the application deadline. Your application number should be marked on each document. Transcripts, diplomas, certificates and other submitted documents which are not in English should be accompanied by a certified translation in English. Certified translation may be provided by your home institution.

Enclosed (Please tick as appropriate.)

- Originals or certified true copies of academic transcripts #. You may complete the Transcript Request Form below and send it to the institute from which the transcript is requested, if applicable.
- Certified true copy of degree certificates
- CHSI reports * (for bachelor's degree awarded by tertiary institutions in the Mainland)
- TOEFL/IELTS ** official score report (if requested).

^Please note that all supporting documents once submitted **will not be returned** and will be destroyed if the application is unsuccessful.

Please note that the University will only **ACCEPT** originals or copies of the documents that have been duly declared as true copies before a notary public (e.g. a Commissioner for Oaths at a City District Office in Hong Kong). Copies of documents may be certified by the appropriate officials of your home institute if you are an overseas applicant. **No photocopies will be accepted.**

*Please set the validity of report for 6 months. Original/ certified true copies of the graduation certificate are no longer accepted.

Please delete as appropriate. **Please note that the University's TOFEL code is 9671.

THE UNIVERSITY OF HONG KONG**Transcript Request Form**

- I. **To the Applicant:** Applicants who did not attach their original official transcript, should complete the first part of this form and send it to the appropriate officer of institute from which the transcript is requested.

Name of Applicant: _____ (_____)
in English in Chinese, if any

University/College Attended: _____

Dates of Attendance: From _____ To _____

Title of Degree/Diploma: _____ Date of Award: _____

Programme applied for admission at The University of Hong Kong:

Postgraduate Diploma in Infectious Diseases (Part-time)

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- II. **To the Officer responsible for issuing transcripts:** The applicant named above has applied for admission to a postgraduate curriculum at The University of Hong Kong. Please send a copy of the **official** transcript together with this form directly to:

Department of Microbiology
The University of Hong Kong
T-19-026, 19/F, Block T
Queen Mary Hospital
Pokfulam
Hong Kong
(Ref.: PDipID)