### THE UNIVERSITY OF HONG KONG FACULTY OF DENTISTRY

### Master of Dental Surgery in Paediatric Dentistry

### NOTES ON SUBMISSION OF SUPPORTING DOCUMENTS

An email notification will be sent to you within 48 hours after your submission of online application. Please follow the instructions in the email and upload your supporting documents in **pdf format** for our preliminary consideration by logging in <u>https://tpg-admission-addon.its.hku.hk/applicant</u>. All documents should be submitted within one month starting from the date you receive the email notification. Your application number should be included on the file name of each document.

For example (the first 10 digits are your application number): 1100112910\_T1 (stand for 1<sup>st</sup> submitted Transcript) 1100112910\_G2 (stand for 2<sup>nd</sup> submitted Graduation Certificate)

T: Transcript	G: Graduation Certificate
E: International English Standard	P: Personal Statement
N: Name Changing Proof	O: Other Certificates

B: Bachelor Certificate C: CV

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.

Please note that you are not required to submit original/certified true copy<sup>#</sup> of your documents to the University during the application stage. Should you be given an admission offer by the University, you will receive notification to submit original/certified true copy of your documents.

## Enclosed (Please tick as appropriate.)

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\*Please delete as appropriate.

<sup>#</sup> 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 District Office in Hong Kong). Copies of documents may be certified by the appropriate officials of your home institution if you are an overseas applicant. **No photocopies will be accepted**.

All documents once submitted will NOT be returned. They will be destroyed if the application is unsuccessful.

## THE UNIVERSITY OF HONG KONG FACULTY OF DENTISTRY

# **Cover Sheet for Transcript Submission**

I. **To the Applicant:** Applicant who did not attach their original official transcript should complete the first part of this form and send it to your former/ current institution from which the transcript is requested.

Name of Applicant:	in English	() in Chinese, if any	
University/College Attended:			
Dates of Attendance: From	I	То	
Title of Degree/Diploma:		Date of Award:	

Programme applied for admission at The University of Hong Kong:

## <u>Master of Dental Surgery in Paediatric Dentistry [MDS(PaediatrDent)]</u> (Full-time)

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

Ms. Ada Ma Faculty of Dentistry The University of Hong Kong 6/F, Prince Philip Dental Hospital 34 Hospital Road Sai Ying Pun Hong Kong [Ref.: MDS(PaediatrDent)]