THE UNIVERSITY OF HONG KONG

Application for Change of Faculty/Departmental Course Enrolment

(To be used <u>AFTER</u> the online add-drop period and submitted to applicant's home Faculty Office)

Notes:

- The application form is applicable to students who have not been able to complete course enrolment via the online system. The form will only be processed AFTER the online add-drop period of the semester concerned.
- 2. Applicants should submit the form to their Supervisor(s) and Chairperson of the Departmental Research Postgraduate Committee (DRPC) for approval and signature.
- 3. The duly signed application form should reach applicants' home Faculty Office no later than two weeks after the commencement of the course(s).
- 4. For successful applications, course enrolment records will be updated in HKU Portal within two weeks after approval. Applicants should contact their home Faculty Office if otherwise.

Nar	ne in BLOCK le	tters (Dr/	Mr/ Miss/ Ms/ Mrs *):	(Surname)		(Given Names)		
Programme: MPhil / 3-year PhD / 4-year PhD *				,	Г	,		
Pro	gramme: MPhi	ıl / 3-year	PhD / 4-year PhD *	Study Mode: Full-time / Part-time *				
University Number:				Degree Registration Date: D D M M Y Y Y Y				
Department:				Faculty:				
Contact Tel. No.:				Email:				
I.	Semester and Academic Year:							
II.	Is this your 1 st application for the change of course(s) in the semester (online add-drop not included)?^ ☐ Yes. ☐ No. This is my 2 nd /3 rd /4 th * application and this is to replace / add to* my previous application(s). (a) Faculty/Department/School Course(s) to ADD:							
	Course Code	Sub- class	Course Title	Comm		Approval by the Head of the course-offering Department/School#+	Result+ (for official use)	
	(b) Faculty/De	(b) Faculty/Department/School Course(s) to DROP:						
	Course Code	Sub- class	Course Title	Comm ment		Approval by the Head of the course-offering Department/School#+	Result+ (for official use)	
+ Reason(s) for disapproval (to be completed by course-offering Department/School if approval is No							ranted):	
IV. I confirm that^ the above course code(s) and course title(s) provided are correct. there is no time clash between/amongst my selected courses. * Please delete as appropriate								
۸	Please delete as appropriate Please tick as appropriate For courses not offered by the applicant's home Department/School, the applicant's home Faculty Office should, on behalf of							
#	the applicant, see	k for add/o	the applicant's home Departme drop approval from the Head/D capplication form.					
	Approved by Superviso			or(s):	Ap	Approved by Chairperson, DRPC:		
Student's Signature Signature				_	Signature			
Name in BLOCK:				Name in BLOCK: Date:				
Date:			Date:	Date:				