In-house Staff Development Training Scheme (IHSD)
Application Form for 2022-23 Fall Term

1. Please complete this form and append additional sheets, if necessary. You are recommended to complete this form and print it for signature and written support from the Head of Department.
2. Application deadline: 9 August 2022
3. Please return this form:
   - to FYTGS for TPG courses (Attn: Ms Cindy To (cindyto@ust.hk))
   - to URAO for UG courses (Attn: Ms Esther Lam (estherlam@ust.hk))

Part I Applicant Particulars		
Name *(same as in identity documents)*	Surname	Given Name
Name in Chinese *(if any)*		
Date of Birth *(dd/mm/yyyy)*		
Place of Birth *(country)*		
Gender	❑Female ❑Male	
HK ID no.		
Place of Origin *(Please select one)*	❑Hong Kong SAR	
	❑The Mainland of China	
	- *Registered Place of Household (戶口所在地) (see Notes for Applicants)*	
	❑Others (please specify)	
Home Address *(Max.40 characters per line)*		
	Country	
Phone No.	Country	Area	Number
Email Address *(All notifications will be sent to this email)*		
Work at HKUST	Position	Department/ Office	Staff no.

Part II Education Background

Please list a **full record of your post-secondary education**, including undergraduate and postgraduate programs **completed or not**, in reverse chronological order. Please appended additional sheets, is necessary.

	1	2	3
Qualification Pursued *(e.g. Bachelor's degree)*			
Awarding Institution			
Country/ Region of Institution			
Title of Award *(e.g. BSc (Hons) in Biology)*			
Major Area(s) of Study *(e.g. Biology)*			
Program Duration			
Program Commencement Date *(mm/yyyy)*			
Mode of Study	❑Full-time ❑Part-time	❑Full-time ❑Part-time	❑Full-time ❑Part-time
Date/Expected Date of Completion/ Graduation *(mm/yyyy)*			
Latest GPA / Average Mark *(e.g. 2.8 out of 4.0)*			
Classification of Award *(e.g. Second Class Honor, if any)*			

Part III English Language Proficiency

(For Official Use)
❑Further Language proficiency assessment not required
❑Required to take an English Language Test. Approval of the admission and course registration will depend on the test result.

Test / Subject and Examination Taken *(Please check as appropriate)*	Date of Test *(dd/mm/yyyy)*	Grade/ Score					
❑ HKDSE English							
❑ HKALE AS Use of English							
❑ TOEFL (iBT/pBT/rpdt*)		Registration No. (16-digit)	Reading	Listening	Speaking	Writing	Total Score
❑ IELTS (Academic Module)		Candidate No. (6-digit)	Listening	Reading	Writing	Speaking	Overall Band Score
❑ Others (please specify)							

* Please delete as appropriate.

Part IV Professional Qualifications, if any (in reverse chronological order)

	1	2	3
Level of Award *(e.g. Inter-school, International)*			
Name of Awarding Body			
Country/ Region			
Qualification / Award *(e.g. Fellow, Chartered/Certified)*			
Basis of Award *(e.g. by election or examination)*			
Date / Expected Date of Award *(mm/yyyy)*			

Part V Examination Attainments (in reverse chronological order)

Date *(mm/yyyy)*	**Examination** *(e.g. HKDSE, HKCEE, HKALE, GCE or IB)*	**Subjects Taken and Grades Obtained**

Part VI Work Experience (in reverse chronological order)

	1		2		3	
Name of Organization						
Country/ Region						
Last Position Held						
Employment Period *(mm/yyyy)*	From	To	From	To	From	To
Mode *(full-time/part-time)*						
Major Responsibilities						

Part VII Information in Support of The Application

Noting that this Scheme is for staff development at the University, please provide:

    i.   reasons for applying for the course(s), information on how relevant the course(s) is/are to your present or planned future duties, and

   ii.   any other information which you believe will be of interest to the selection panels.

Part VIII Course Selection

Enter a maximum of 3 courses in the order of priority. ***Offers will be made for a maximum of 2 courses****. You may refer to the course list at My Admin Intranet (https://my-ai.ust.hk/my-admin-corner) > "My Administrative Corner" > "Student Related" > "Student information System" > "Class Search" now.*

No.	Course Code	Course Title
1		
2		
3		

Please read the statements below and confirm your agreement by checking the corresponding boxes.

❑ I declare that the information given in support of this application is accurate and complete. I understand that this information will be used in the admission decision process and that any misrepresentation or forged items found in this application will disqualify me for admission and enrollment at HKUST.

❑ I authorize HKUST to obtain any and all information about my candidature for my studies in institutions in Hong Kong and elsewhere, if needed.

❑ I authorize HKUST to use my data as a basis of all types of processing relevant to admission in 2022-23 under the IHSD Scheme and for all other associated purposes.

❑ I understand that, upon my registration in a course, this data will become a part of my student record. That student record may be used for academic and administrative purposes consistent with the mission of the University.

❑ I understand that I can send a request to the Program Manager of FYTGS through the enquiry form at https://fytgs.hkust.edu.hk/enquiry to access and correct personal data held by the University during the admission process.

❑ I understand that this application cannot be considered if I disagree with any of the statements above.

Signature	Date

Part IX To be Completed by the Head of Department

❑   I support this application under the University's In-house Staff Development Training Scheme, and **agree to release this staff member to attend classes on a part-time basis** upon his/her admittance to the course(s).

❑   I do not support this application under the University's In-house Staff Development Training Scheme.

Recommendations/ Comments:

Signature	Date
Name	Post/ Department

Part X To be Completed by UG/PG Coordinator

Please note the admission decision below. The indication of "Yes" under "Extra Quota" would mean that the program will allocate an extra course quota in addition to those for full-time regular students.

No.	Course Code	Course Title	Admission Approval	Extra Quota	Remarks, if any
1			❑ Yes ❑ No	❑ Yes ❑ No	
2			❑ Yes ❑ No	❑ Yes ❑ No	
3			❑ Yes ❑ No	❑ Yes ❑ No	
Signature			Date		
Name			Post/ Department		