



For Office Use Only

Application No.

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Application Form 2022/23 入學申請表

BSc Degree Programme in Chinese Medicinal Pharmaceutics 中藥學專業理學學士學位銜接課程

Registration Number (Non-Local Higher and Professional Education (Regulation) Ordinance): 231191 非本地高等及專業教育 (規管) 條例課程註冊號碼: 231191

Please complete the form in **ENGLISH** and print in **BLOCK LETTERS** with black ball pen. 請用**黑色**原子筆並以**英文**正楷填寫。

SECTION 1 – PERSONAL DETAILS 第1部份 — 個人資料	
Title 稱謂 (Mr 先生 / Ms 女士 / Mrs 太太 / Miss 小姐) * delete if inappropriate <i>請刪去不適用者</i>	IVE / SBI / HKDI Student No. 學生編號 (if any 如有)
Gender 性別	
Name in English 英文姓名 (As shown on your HK Identity Card / Pa	ssport 所填報的姓名須與香港身份證 / 護照相同)
Surname 姓 First / Oth	er Names 名
Name in Chinese 中文姓名	Day (DD) / Month (MM) / Year (YY) 日 月 年
Chinese Character Codes 中文電碼	Date of Birth 出生日期
Type of Identification Document	/ □ Passport No. () :
Correspondence Address (in English) 通訊地址(必須用英文填寫)	
Contact Details 聯絡方法	
Mobile Phone No. 手提電話號碼 Reside	ential Tel. No. 住宅電話號碼
Email Address 電郵地址	
Do you require a student visa / entry permit to study in Hong Kong?你是否需要持有由香港入境事務處處長簽發的學生簽證或進入許可方	
SECTION 2 – APPLICANT WITH SPECIAL NEEDS 第2部	3份 — 特殊學習支援
We offer equal opportunities to all applicants with or without disable assistance, please provide a brief description of your disability below your requirements of special facilities and make effort to accommod	w. The information will help us to better understand

It is a matter of discretion for individual employers to recognise any qualification to which this course may lead. 個別僱主可酌情決定是否承認本課程可令學員獲取的任何資格。

要的特殊設施,並盡可能提供支援。

SECTION 3 – EDUCATION 第3部份 — 教育程度

(Please give the name of schools, colleges, universities or training organisations attended including full-time or part-time courses, apprenticeship, etc. and attach certified copies of relevant academic documents.)

(請填寫曾就讀的學校、學院、大學或訓練機構,包括全日制/兼讀制課程或學徒訓練。請附上有關學歷之認證副本。)

	ittended / year) 月 / 年)	School / College / Institution Attended /		Stream	Mode of Study (e.g.: Full-time / Part-time on tream Campus, Distance	Qualification	Date of
From 由	To 至	Attending 曾修讀或正修讀學校 / 學院 / 教育機構	Programme Title 課程名稱 Specification 分流	Learning, etc.) 上課方式 (例如:當地院校 全日制、兼讀制、 遙距授課等)	Obtained 獲頒學歷	Award 頒授日期	

SECTI	ON 4 – \	WORK EXPERIENCE (in chronological order)	第4部份一	工作經驗(請按日期順序列出)		
Date (month / year) 日期 (月 / 年)		Organisation		Position		
From 由	To 至	就職公司或團體		職位		

SECTION 5 - ENQUIRIES 第5部份 — 查詢

All enquiries should be directed to the SHAPE office as follows: 請向以下才晉高等教育學院辦事處查詢:

SHAPE (Chai Wan) Office 才晉高等教育學院 (柴灣)辦事處

Room 012, G/F, Academic Block, 30 Shing Tai Road, Chai Wan, Hong Kong

香港柴灣盛泰道30號教學樓地下012室

Tel. 查詢電話: 2595-8357 Fax 傳真號碼: 2976-5702

SECTION 6 – APPLICATION FORM SUBMISSION AND ACKNOWLEDGEMENT 第6部份 ─ 申請表提交及確認通知

 Application form with full sets of photocopies of certified credentials including transcripts and certificates of awards should be submitted by mail or in person to SHAPE (Chai Wan) Office, Room 012, G/F, Academic Block, 30 Shing Tai Road, Chai Wan, Hong Kong. You may also return the application form to a drop box located at IVE and HKDI campuses.

請把申請表格連同成績表及證書等完整的學歷證明副本郵寄或親身遞交至**香港柴灣盛泰道30號教學樓地下012室才晉高等教育學院(柴灣)辦事處。**你亦可利用設於香港專業教育學院及香港知專設計學院的收集箱遞交申請表格。

2. We will acknowledge receipt of your application by email. Please make sure your email address provided on page 1 of this application form is correct.

我們會以電郵方法確認收到你的申請表。請覆核於頁一提供的電郵地址為正確無誤。

SECTION 7 – TUITION FEE PAYMENT AND REFUND ARRANGEMENTS 第7部份 — 學費及退款安排

Total programme fee is <u>HK\$98,900</u>. This consists of a registration fee of <u>HK\$3,500</u> and a tuition fee of <u>HK\$95,400</u>.
 The tuition fee is payable by 4 instalments and does not include the cost of transportation, room and board, and insurance in Nanjing. Each instalment will be collected within 1 month before the commencement of the semester.

整個課程費用為港幣\$98,900元,包括註冊費港幣\$3,500元及學費港幣\$95,400元(分四期繳交),每期學費須於學期開始前一個月內繳交。在南京的旅費,食宿及保險將由學生自理。

2. If you accept the offer, you should pay the registration fee and the 1st instalment of the tuition fee in full before the deadline stated in the offer letter to complete the registration procedures.

如你獲得取錄,請於錄取通知書上的指定限期內,繳付註冊費及第一期所需的學費,以便完成入學註冊手續。

3. All fees paid will be refunded if the programme is withdrawn or not offered.

倘撤銷或不開辦課程,已收取的費用將全數退還。

4. On premature cessation of the programme, all fees and charges that have been collected in respect of any part of the programme failing to be conducted on or after the date of the cessation will be refunded within 1 month of premature cessation.

倘課程提前結束,如有任何部分的課程未能在結束當日或其後完成,所有已收取的有關該部分課程的費用於提前結束 日期起計一個月退還。

SECTION 8 - APPLICATION FEE PAYN	MENT 第8部份 — 申請	· 費
Apply before application deadline to enjoy programme booklet or visit www.shape.edu. 於截止日期前報名,可獲豁免課程報名費。有	hk.	For terms and conditions, please refer to the 全小冊子或瀏覽www.shape.edu.hk。
The application fee is HK\$200 and is NON	N-REFUNDABLE. 課	_{锃申請費為港幣二佰元及概不發還。}
Please indicate your payment method with a "請以「✓」表示你所選用的繳費的方法及在此則		payment receipt in the box provided.
If the application fee is paid by Teller Machine) Transfer Services, instructions below in making payment: 如以「自動櫃員機」轉賬繳交申請費 繳費。	please follow the	If the application fee is paid at 7-Eleven , the QR code for payment at 7-Eleven is shown below. 如以7-Eleven繳交申請費,請使用以下 7-Eleven繳費條碼。
HSBC & Hang Seng Bank ATM ✓ Select "Bill Payment Service" ✓ Select "Education – Others" ✓ Select "Vocational Training Counci ✓ Enter Type: "01" ✓ Enter Payment Number: please serbelow ✓ Enter Amount: HK\$200		3050107700001900048
JETCO ATM Select "JET Payment" Enter Merchant Code: "9151" Enter Type: "01" Enter Payment Number: please see payment number below Enter Amount: HK\$200 Payment Number for ATM Transfer Services: 自動櫃員機繳費編號: 2700001		Please glue the original receipt here. 請在此貼上繳費收據正本。
Application form without attacl ***沒有貼上 ***Please DO NOT send in any cheque o	交易通知書正本的申請表料	eposit the application fee on your behalf.
SECTION 9 - SOURCE OF KNOWING S	SHAPE PROGRAMMES	S 第9部份 — 獲悉課程途徑
From which of the following sources have you lease indicate your source(s) with a "✓" in the 请問你是從下列哪種途徑得悉才晉高等教育學	appropriate boxes (You m	nay select more than one.):
□ SHAPE Website 才晉高等教育學院網頁	☐ Consultation Day 課程諮詢日	☐ Yahoo / Google Keyword Search Yahoo / Google 搜尋
□ SHAPE Prospectus / Leaflets 才晉高等教育學院課程指南 / 單張	□ Information Session 課程講座	_
□ Classmates / Friends 同學 / 朋友	Information Panels 課程資訊展板	□ Website / Mobile App Advertisement 網頁 / 手機程式廣告
□字 / m久 VTC Lecturers (Class Visits / Webinars) 職業訓練局老師 (課堂 / 網上講座)	Social Media 社交媒體	耐貝 / 于機性以廣古 ☐ Others 其他 (Please specify 請註明:)
		nission and events of the School for Higher and

Professional Education, member institutions of the Vocational Training Council and the China Pharmaceutical University?

你是否願意在日後收到才晉高等教育學院、職業訓練局轄下院校 / 中心及中國藥科大學的資訊?

□ YES 是 □ NO 否

SECTION 10 - DECLARATION 第10部份 — 聲明

(Application form without signature will not be processed. 沒有簽署的申請表將不獲處理。)

- 1. I declare that the information given in the application is, to the best of my knowledge, accurate and complete. I understand that this information will be used in the admission process of the programmes offered by the School for Higher and Professional Education and the China Pharmaceutical University.
 - 本人謹此聲明在本申請表填報的資料均屬正確及完備,並明白填報之資料將會在才晉高等教育學院及中國藥科大學所舉 辦課程遴選過程中作參考之用。
- 2. I authorise the School for Higher and Professional Education and the China Pharmaceutical University to obtain, and the Vocational Training Council (VTC) to release, information about my student record in member institutions of the VTC for the purpose of processing this application.
 - 本人授權才晉高等教育學院及中國藥科大學索取有關本人於職業訓練局轄下院校 / 中心的就讀資料,並授權職業訓練局提供此等資料作課程遴選過程中參考之用。
- 3. I authorise the School for Higher and Professional Education and the China Pharmaceutical University to use my data to carry out checks on multiple applications and checks on records of current and previous studies in member institutions of the VTC. 本人授權才晉高等教育學院及中國藥科大學使用本人的資料查詢有關申請事宜及有關本人於職業訓練局轄下院校就讀的資料。
- 4. I authorise the School for Higher and Professional Education and the China Pharmaceutical University to obtain, and the relevant institutions to release, further academic information or official student records if necessary, and / or where my work experience is relevant, to verify my employment records, for the purpose of making an informed decision about my application. 本人授權才晉高等教育學院及中國藥科大學索取有關本人於任何一間機構的學術或就讀資料,以及 / 或受聘記錄,並授權有關機構提供此等資料,以用作課程遴選過程中參考之用。
- 5. I understand that, upon my registration in a programme in the School for Higher and Professional Education and the China Pharmaceutical University, the data contained in the application form will become part of my student record and may be used for all purposes relating to admission, registration, academic and administrative communication, alumni management and contacts, research, statistical and marketing, including direct marketing. The School for Higher and Professional Education may disclose and / or transfer my student data to VTC, including its member institutions and institutes, and any other third parties such as government departments, organisations, institutions, agencies, service providers in relation to the above purposes.
 - 本人明白在註冊後,本人在申請表內所填報的資料將轉作為才晉高等教育學院及中國藥科大學的學生記錄,才晉高等教育學院可利用該等記錄作入學、註冊、學術及行政傳訊、校友管理及聯絡、研究、統計及市場推廣(包括直接市場推廣)之用。才晉高等教育學院可根據上述目的,將我的學生資料披露及/或轉移予職業訓練局(包括其轄下所有機構成員及院校),以及任何其他第三方,例如政府部門、團體、機構、代理及服務供應商等。
- 6. I understand that the School for Higher and Professional Education and the China Pharmaceutical University may use my application data for statistical purposes. The application form and other related personal information will be disposed of after the completion of the 2022/2023 admissions exercise. Nevertheless, if I have indicated in Section 9 that I wish to receive information from the School for Higher and Professional Education and the China Pharmaceutical University, my application data will be retained.
 - 本人明白才晉高等教育學院及中國藥科大學可能使用本人的申請入學資料作統計及分析用途,本人的申請表及有關個人資料會於2022/23年度才晉高等教育學院收生程序完結後銷毀。然而,若本人於申請表內**第9部份**表示願意收到才晉高等教育學院及中國藥科大學的資訊,則本人的申請資料將被保留。
- 7. I understand that in accordance with the Personal Data (Privacy) Ordinance, I have the right to request access to, and the correction of my personal data. I should submit written request to the School for Higher and Professional Education at Room S604, 6/F, Lee Wai Lee Building, 30 Shing Tai Road, Chai Wan, Hong Kong if I wish to access or make corrections to my data.
 - 本人明白根據個人資料(私隱)條例,本人有權查閱及更改本人的個人資料。本人如欲更改個人資料,必須以書面方式通知才晉高等教育學院(地址:香港柴灣盛泰道30號李惠利高等教學樓6樓S604室)。
- 8. I fully understand the Intellectual Property Policy (the Policy) indicated at www.shape.edu.hk (Admission → Points to Note) which is applicable to students of all VTC member institutions. I understand and agree that adherence to the Policy is a condition of continued enrolment and graduation.
 - 本人完全明白於 www.shape.edu.hk (Admission → Points to Note) 所列出之學生知識產權政策適用於所有職訓局機構成員的學生。本人明白及同意遵守有關政策及規則是修讀課程及取得畢業資格的先決條件。
- 9. I understand that provision of any false or misleading information therein shall lead to DISQUALIFICATION of application without notice and cancellation of any resulting registration. Any fees paid will NOT be refunded.
 - 本人明白若提供的資料為虛假或誤導性,本人的申請資格將被取消,雖經註冊,亦屬無效,所繳費用概不發還。

Applicant's Signature:	
申請人签署	

Date: 日期

CHI	ECKLIST FOR APPLICANT 申請備忘		
Before submitting your application, please check if you have: 遞交你的申請前 [,] 煩請確保以下事項已辦妥:			
	Completed the form in full. 已填妥申請表格。		
	Signed and dated the form. 已於申請表格上簽署及填上日期。		
	Enclosed copies of relevant academic documents and transcripts. 已夾附有關學歷之副本。		
	Enclosed the original receipt of application fee payment. 已夾附繳費收據正本。		
	A waiver of application fee may be granted to eligible applicants. For details, please visit www.shape.edu.hk. 合資格申請人士可獲豁免課程申請費,詳情請參閱 www.shape.edu.hk。		