Application for Change of Faculty/Departmental Course Enrollment – Semester 2, 2016-17

(To be used after January 15, 2017 and submitted to applicant’s home Faculty Office)

Notes:
1. This form is applicable for students who have not been able to complete course enrollment via the online system. This form will only be processed after the online add-drop period i.e. after January 15, 2017.
2. Applicants should submit this form to the Supervisor(s) and Chairperson of the Departmental Research Postgraduate Committee (DRPC) for approval and signing.
3. Duly signed application forms should reach applicants’ home Faculty Office no later than 2 weeks after the commencement of the course(s).
4. Course enrollment records should be updated in the HKU Portal for successful applicants in two weeks after approval. Applicants should contact their home Faculty Office if it is not so.

Name in BLOCK letters (Dr/ Mr/ Miss/ Ms/ Mrs *) __________________________ (Surname) __________________________ (Given Names)

Programme: MPhil / 3-year PhD / 4-year PhD * Study Mode: Full-time / Part-time *

University Number __________________________ Degree Registration Date __________________________

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Department __________________________ Faculty __________________________

Contact Tel. No. __________________________ Email __________________________

I. Is this your first application for change of course(s) in Semester 2, 2016-17? (online add-drop not included)

☐ Yes.

☐ No. This is my 2nd/3rd/4th * application and this is to replace / add to* my previous application(s).

Notes: It is your responsibility to enter the CORRECT COURSE CODES and TITLES below. Please refer to the Faculty/Department homepage for reference.

II. Faculty/Department/School Course(s) you want to ADD:

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Sub-class</th>
<th>Course Title</th>
<th>Commencement Date</th>
<th>Approval by the Head of the course-offering Department/School #</th>
<th>Result (for official use)</th>
</tr>
</thead>
</table>

III. Faculty/Department/School Course(s) you want to DROP:

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Sub-class</th>
<th>Course Title</th>
<th>Commencement Date</th>
<th>Approval by the Head of the course-offering Department/School #</th>
<th>Result (for official use)</th>
</tr>
</thead>
</table>

IV. I confirm that

☐ the above course code(s) and title(s) I have provided are correct.

☐ there is no time clash between/amongst my selected courses.

* Please delete as appropriate
# If the course is not offered by the applicant’s home Department/School, the applicant’s home Faculty Office should on behalf of the applicant obtain the course add/drop approval and signature from the Head concerned; and should also inform the applicant of the application result within one week upon receipt of this request form.

Approval by Supervisor(s): __________________________ Approval by Chairperson, DRPC __________________________

Student’s Signature __________________________ Name in BLOCK: __________________________ Date: __________________________