

THE CHINESE UNIVERSITY OF HONG KONG, SHENZHEN  
香港中文大学（深圳）  
THE GRADUATE SCHOOL  
研究生院

**Authorization Form For Collection of Academic Documents**

**(Not Applicable to Graduation Certificate)**

**委托他人代领学术文件申请表（不适用于学位证书）**

If you wish to authorize a representative to collect the academic document(s) (e.g. transcript, certifying letter, etc) on your behalf, please complete this form.

本表适用于委托他人代为领取成绩单、在读证明等学术文件时填写。

*(The personal data of the student/graduate or the representative will be used for collection of the academic document(s) and record purpose only. This Instruction and copy of the student's/graduate's/representative's ID document will be kept in the Graduate School. For correction of or access to the personal data after submission of this form, please contact the Graduate School at 86-755-8427 3901, or email to [pgs@cuhk.edu.cn](mailto:pgs@cuhk.edu.cn).)*

此表格所收集的资料将用以处理有关的申请，所提供的资料于无需保留时将全部销毁。如在递交此表格后要查阅或改正个人资料，请联络研究生院：（电话：（86）755-84273901 邮箱：pgs@cuhk.edu.cn）

**I . Personal data of the student/graduate 个人信息**

Name (Chinese) 姓名（中文）\_\_\_\_\_ (English)（英文）\_\_\_\_\_

Student I.D. No. 学号\_\_\_\_\_ Programme 课程组 \_\_\_\_\_ Degree 学位\_\_\_\_\_

ID Card/Other Identity No.: \_\_\_\_\_ Contact Phone No.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**ATTENTION: The representative should bring along this form together with the copy of the identity document of the student/graduate mentioned above.**

**请注意：被委托人应携带本表格及申请人的身份证明副本以供验证。**

I hereby authorize the following representative to collect my document(s) on my behalf\*:

本人现授权下述人士，代领本人的下述文件\*:

Certifying Letter 在读证明  Transcript 成绩单

Report on Curriculum Details 课程详情报告  Others, please specify:其他，请注明\_\_\_\_\_

\*Please tick as appropriate. 请勾选以上选项。

**II . Personal data of the my representative 代领人信息**

Name (Chinese) 姓名（中文）\_\_\_\_\_ (English)（英文）\_\_\_\_\_

Type of ID Document 身份证明文件名称\*  Passport 护照  Identity Card 身份证

ID Document No.: 身份证明文件号码 \_\_\_\_\_

\*Please tick as appropriate. 请勾选以上选项。

Signature of Student/Graduate: 申请人签名 \_\_\_\_\_ Date : 日期 \_\_\_\_\_

**Acknowledgement of receipt of the above academic document(s) 文件领取签署**

Signature of Representative: 代领人签名 \_\_\_\_\_ Date : 日期 \_\_\_\_\_

**For Office of the Graduate School use only**

Handled by:

Date: