

香港中文大学(深圳)
THE CHINESE UNIVERSITY OF HONG KONG, SHENZHEN
研究生院
THE GRADUATE SCHOOL
研究生转换专业申请表
APPLICATION FORM FOR CHANGE OF PROGRAMME FOR POSTGRADUATE STUDENTS

I. Personal Particulars 个人资料

姓名(英文) (中文) 学号
Name: (in English) _____ (in Chinese) _____ Student I.D. No.: _____

学院 专业全称 学习类型
School: _____ Programme _____ Time Basis: 全日制 Full-time
 兼读制 Part-time

入学年份 预期毕业年份 / 学期 联络电话
Year of Attendance: _____ Expected Year / Term of Graduation: _____ Contact Tel. No.: _____

收集个人资料声明

1. 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。
2. 本表格所收集的资料或会转交香港中文大学(深圳)其他行政或教学部门作考虑或批核用。
3. 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)755-84273900 电邮: gs@cuhk.edu.cn)

Personal Information Collection Statement:

1. The personal data provided on this form will be used by the Graduate School for the purpose of processing this application. All information provided, when no longer required, will be destroyed.
2. Information provided on this form may be transferred to other departments/administrative units within CUHK (SZ) for consideration and granting approval, where applicable.
3. For correction of or access to the personal data after submission of this form, please contact the Graduate School: (Tel. No.: (86)755-84273900, e-mail address: gs@cuhk.edu.cn)

II. Financial Supports 奖学金

The student's current financial support: 学生现有的奖学金情况:

Yes, 有 _____ None 没有

(Please specify the detailed funding package, including tuition waiver and stipend 请说明详细的资助方案, 包括学费减免和津贴)

Remarks, if any 备注, 如有: _____

III. I hereby inform you of my decision to withdraw from the Programme with effect from _____ (dd/mm/yy)

本人决定于 _____ (日期) 起从该专业退出, 特此通知。

签字 日期
Signature: _____ Date: _____

IV. Approval / Recommendation by the Original Programme Director/Advisor/Supervisor 转出课程主任或导师签批

Approved Not Approved

Remarks, if any: _____

Date: _____ [dd/mm/yy] Signature: _____

V. For the Original Graduate Panel Use Only 适用于转出学院研究生事务委员会

To: Graduate School
The Graduate Panel has noted the withdrawal of the above-named student. Please process the withdrawal as request.

Remarks, if any: _____

Date [dd/mm/yy]

Signature of Graduate Panel Head

VI. I wish to apply for transferring to the following Programme 本人拟申请转入以下专业:

School 学院: _____ Programme专业: _____

Application Date 申请日期: _____ Signature 签名: _____

VII. Reason for Change of Programme 申请转换专业的原因

VIII. Approval / Recommendation by the New Programme Director/Advisor/Supervisor 转入课程主任或导师签批

Approved Not Approved

Remarks, if any: _____

Date: _____ [dd/mm/yy] Signature/Post: _____ / _____

IX. Approval / Recommendation by the School Dean / Graduate Panel 学院院长 / 研究生事务委员会签批

Approved Not Approved

Remarks, if any: _____

Date: _____ [dd/mm/yy] Signature/Post: _____ / _____

X. To be noted by Dean of the Graduate School 通报研究生院院长

Noted

Remarks, if any: _____

Date: _____ [dd/mm/yy] Signature/Post: _____ / _____

备注: 1. 适用于跨学院转专业;
2. 转换专业后, 入学年份不变。

NOTE: 1. Applies to change programme between different schools;
2. The year of registration remains unchanged.