The University of Hong Kong
Faculty of Science

Course Approval Form 2018-2019

For Incoming Exchange / Visiting study

Important!

1. This form is only applicable to those BSc incoming exchange / visiting students who wish to select course(s) where you have not met prerequisite(s) or there are timetable clashes. Written approval from the course selection adviser of the department/school offering the course is necessary on this form. Their contact details can be found at https://www.scifac.hku.hk/f/upload/5890/CSA.pdf. You should note that only in very exceptional circumstances will such approval be given. You are therefore advised not to choose such courses.

2. Return this form to the Faculty Office by the deadline specified in the Important Dates for 2018-2019 Course Selection Exercise.

(Note: For those students who wish to seek special approval for taking courses offered by the School of Biological Sciences (e.g. BIOL courses), they need to submit the form directly to the School of Biological Sciences Office by the deadline.)

I. PERSONAL PARTICULARS

University No : Name :

Programme: BSc (Incoming Exchange / Visiting *)

Tel No. : (Mobile) (Home) (Room No.)

Email address :

* Please delete as appropriate

II. COURSES REQUIRE SPECIAL APPROVAL

(Only list out those courses which require special approval)

| Computer Course Code | Credit | Sem | Class | Course Title | Reason # | Approved and signed by | Name (IN BLOCK LETTERS) of |
|----------------------|--------|-----|-------|-------------|----------|------------------------|Course Selection Adviser|
|                      |        |     |       |             |          |                        | of the department/school offering the course |

# State the reason for seeking special approval by indicating any 1 of the following defined letters if applicable:

A = Timetable clashes; B = Prerequisite not met; C = Timetable clashes & Prerequisite not met; D = Course which is not available in the optional course list on-line;

(Both courses with timetable clashes should be listed.)

III. DECLARATION

I accept that the information provided will be used in matters relating to the selection of courses. As part of this exercise, it may be necessary to disclose details to internal departments authorized to process the information.

Signature : ___________________________ Date : ___________________________