

Advanced Diploma in Nursing Leadership and Health Care Management Programme

Application Form 報名表 (Deadline of Application: 14 January 2018)

(2018 Cohort)

Please complete all relevant parts in BLOCK LETTERS and with BLACK PEN. Please read the Guide for Applicants on the other page before completing this form. 請用黑色原子筆以正楷填寫有關部分,填寫本表格前請細閱附頁的申請人須知。

For Office Use Only																											
Application Received on:								HKID verified by					on														
	Acad/I	Prof (Qual	& Otl	hers						ļ		docı	ument	s ver	ified	by					c	n				
1. Personal Parti	cular	rs佰	国人	<u>資</u>	斜(*	Plea	se de	elete	as aj	pprop	priat	e請╢	刑去	不適用	月選J	頁)											
Name (Surname first) 英文姓名 (姓氏先行)																											
Name in Chinese 中文姓名																				Sex	、性別	刊*	M ±	男 /]	F女		
HK ID Card/Passport No* 香港身份證/護照號碼*														Date 出生			Day	H	Mo	nth J	ŧ	Year	·年				
Nationality 國籍																	on-loo 青人,										
Correspondence Address 通訊地址 (英文)																											-
Tel. No. (Home) 住宅電話														Tel. I 辦公			e)]
Mobile 手提電話														Fax I 傳真	No. 【號碼	髟]
WhatsApp Messenger 即時通訊應用程式											E-m 電郵	ail 『地址	Ŀ]

2. Qualifications & Working Experience 學歷/專業資格/工作經驗

(Fill in this part if relevant to this application in chronological order 申請報讀課程所需的資歷按日期順序列出)

a. Academic qualifications 學歷 (Please use a separate sheet if necessary 如不敷應用,請另備紙張)

Awarding Institution	Title of Award	Year of Award
頒發機構	學銜	頒發年份

b. Professional qualifications 專業資格 (Please use a separate sheet if necessary 如不敷應用,請另備紙張)

Awarding Institution	Title of Award	Year of Award
頒發機構	學銜	頒發年份

c. Working experience 工作經驗 (Please use a separate sheet if necessary 如不敷應用,請另備紙張)

From 由		To至		 	Working Department /	
Month 月	Year 年	Month 月	i cui	a constraint the transformed and	Unit / Specialty 任職部門 / 單位 / 專科	Position 職位

d. Other information relevant to this application 其他相關資料

(Please use a separate sheet if necessary 如不敷應用,請另備紙張)

3. Checklist for Submission of This Application Form 提交申請表前的核對清單

- Guide for Applicants has been read
 已閱讀申請指引
- All applicable sections have been completed
 已填妥表格上每一個適用部分
- Full set of certified copy of supporting documents (e.g. certificates, transcripts of your previous studies, and etc.)

已附上完整之證明文件的核證副本(如:學歷證書,學業成績單等)

Crossed-cheque for a non-refundable HK\$200 of Application
 已附上劃線支票港幣 200 元正作報名費之用

4. Apply for the Professional Title for registered nurses and registered midwives 申請專業資格

To enhance the professional development of continuing education for nurses and midwives; the College encourages and welcomes a registered nurse or registered midwife, whom admitted to practice the professions of nursing or midwifery administrative or management practice, to apply the Associate Fellow of HKCNHCM.

為提昇護士及助產士的專業發展及持續進修,香港護理及衞生管理學院設立副院士制度,積極鼓勵並 歡迎有意實踐護理於行政及管理專業化的註冊護士及註冊助產士申請成為本學院之副院士。

(Please tick (✓) as appropriate 請於適用方格填上✓號)

I am interested in applying to be the Associate Fellow of the HK College of Nursing and Health Care Management.

本人有興趣申請成為香港護理及衞生管理學院的副院士

I am NOT interested in applying to be the Associate Fellow of the HK College of Nursing and Health Care Management.

本人不感興趣申請成為香港護理及衞生管理學院的副院士

5. Declaration 聲明

I authorise HK College of Nursing and Health Care Management to use my personal data for processing my application for admission and for transferring to the student record system when I am offered a place of study. I understand that the information will be used in activities in support of my study at the College.

本人授權香港護理及衞生管理學院及使用本申請表內有關的個人資料作處理申請入學之用。本人明白若獲得學院取錄,本人的資料將會轉為學院的學生紀錄,並用於有關教學事宜之上。

I declare that all particulars given in this form are true and correct to the best of my knowledge and understand that provision of any false and misleading information will lead to disqualification of my application for admission and registration in the College. Any fees paid will not be refunded. 本人謹此聲明,此表格內所填報各事項,均屬真實無訛,如有任何虛報或誤導資料,則本人的申請及註冊資格均會被取消,所有已繳費用概不退還。

I understand that the above course(s) is/are not Continuing Education Fund reimbursable course(s). 本人知悉及明白以上報讀之課程均**不能**申請持續進修基金。

Signature 簽署

Date 日期

Guide for Applicants 申請指引 (English Only 只限於英文版)

(for admission to Advanced Diploma in Nursing Leadership and Health Care Management)

Programme Organiser: HK College of Nursing and Health Care Management (HKCNHCM / the College)

Instruction on completing the application form

- 1. Please complete the form in English and print in block letters.
- 2. Please complete all parts of the application form in full.
- 3. Please make sure that you have satisfied the entry requirements, if any.
- 4. Please complete the application form clearly and accurately; sign the application form before submitting your application. Incomplete forms will not be processed.

Submission of application

5. Please submit your completed application form by email, by hand or by post to "Hon. Secretary, HK College of Nursing and Health Care Management, LG1, School of Nursing, Princess Margaret Hospital, 232 Lai King Hill Road, Lai Chi Kok, Kowloon, HKSAR " with supporting documents e.g. certificates, transcripts of your previous studies and etc.

Verification of supporting documents

- 6. Submit copy of certificate(s) and transcript(s) in the following manners:
 - I. Copy / copies which are certified as true copies by the awarding academic institution(s);
 - II. Copy / copies with statutory declaration made by the applicant himself / herself at a District Office that the documents are true copies of the original(s) held by the applicant. (In this regard, applicants should contact the Advanced Standing Office for proper wordings to be used in the declaration.)
 - III. Notarized / verified copy / copies made by solicitors who are in the list of "Members with Practising Certificate" of "Law List" from "The Law Society of Hong Kong" (http://www.hklawsoc.org.hk/pub_e/default.asp).

Payment Methods and Procedures

7. Payment Methods of Application Fee and Tuition Fee

Application Fee

Applicants are requested to submit a non-refundable application fee of HK\$200 together with this application form while submission.

Tuition Fee

Successful applicants are required to submit the full tuition fee by ONE installment upon received the written notification from the College.

8. Only the following payment methods will be accepted:

Cheque:

Please send a crossed cheque (made payable to "**HK College of Nursing and Health Care Management Limited**") to "Hon. Secretary, HK College of Nursing and Health Care Management, LG1, School of Nursing, Princess Margaret Hospital, 232 Lai King Hill Road, Lai Chi Kok, Kowloon, HKSAR ".

Notification of application results

- 9. Successful applicants will receive a written notification from the College confirming that the enrolment about two weeks before course commencement together with the course schedule. Please contact the College if you do not receive any notification one week before the course commencement.
- 10. Unsuccessful applicants will be notified in writing by the College. Course fees paid, if any, will be returned to them by ordinary mail.

Fee refund policies

11. Except for unsuccessful applications or course cancellation, course fees are not refundable. Fees paid and places allocated on course are not transferable after application.

Certification

12. An Advanced Diploma in Nursing Leadership and Health Care Management will be awarded by HK College of Nursing and Health Care Management to students who attend 80% of the class and pass a combination of course work and an individual project.

Use of information

- 13. Personal data provided as part of an application for admission will, during the admission process, be used solely for the purpose of admission, and in this connection the data will be handled by HKCNHCM and other relevant institutions authorised to receive it.
- 14. Application papers of unsuccessful applicants will be destroyed after the admission process has been completed.
- 15. Application papers of successful applicants will become part of the student file and the data will thereafter be handled by HKCNHCM.
- 16. Under the provisions of the Personal Data (Privacy) Ordinance, applicants have rights to request access to, and the correction of, their personal data. Applicants wishing to access or make corrections to their data should submit written requests to HKCNHCM.

Enquiries

17. All enquiries should be directed to: <u>Information & Application</u> Program Coordinator HK College of Nursing and Health Care Management Fax: 2370 0216 Email: admin@hkcnhcm.org

Note: The College reserves the rights to cancel any courses, and to make any necessary changes to the schedules, contents, and mode of delivery of the courses offered.