



Application for Make-up Examination (Semester __, 20 __ - 20 __)

1. Please submit this application form together with supporting document(s) to the Academic Registry **within 5 working days after the missed examination**. Late application or application without supporting document(s) will NOT be processed.
2. For absence owing to illness, the original medical certificate and the [Form of Medical Certificate](#), completed by a qualified medical practitioner must be submitted with this application form to the Academic Registry.
3. Students will be notified of the result of their applications for make-up examination **via email** in early January for Semester 1 and early June for Semester 2.
4. Date, time and venue of the make-up examinations will be announced at the Academic Registry's homepage at http://buar2.hkbu.edu.hk/curr/ug_std/exam_grades/make_up_supplementary_exam_schedule/ **one week** before the make-up examination period stated on the academic calendar. Students are required to check the schedule by themselves at the above website.
5. No further arrangements would be made for students who are absent from the scheduled make-up examinations.

Part A: To be filled in by student

Student Name: _____ (_____) Student No.: _____
(in English) (in Chinese)

Programme/Option: _____ Study Year: _____ Contact Tel. No.: _____

I hereby submit my application for make-up examination(s) for the following course(s):

Course 1:

Code: _____ Section: _____ Title: _____

Instructor(s): _____ Teaching Department: _____

Examination Date: _____ Time: _____ Venue: _____

Course 2:

Code: _____ Section: _____ Title: _____

Instructor(s): _____ Teaching Department: _____

Examination Date: _____ Time: _____ Venue: _____

Course 3:

Code: _____ Section: _____ Title: _____

Instructor(s): _____ Teaching Department: _____

Examination Date: _____ Time: _____ Venue: _____

Reasons for Absence (supporting documents are required):

Signature: _____

Date: _____

Part B: For office use

Recommendation of Course Instructor and Department / Programme Head

- Notes: (a) Please read the General Regulations stipulated in the current Calendar / Bulletin for rules concerning make-up examinations.
(b) A new examination paper should be set for the make-up examination.
(c) Remarks from Academic Registry: _____

(1) I recommend / do not recommend* the applicant for make-up examination for Course _____
(course code)

Comments: _____

Course Instructor: _____ Date: _____
(Signature)

(2) I support / do not support* the course instructor's recommendation.

Comments: _____

Department / Programme Head: _____ Date: _____
(Signature)

*Please circle where appropriate

Decision of Academic Registry

Approve () Disapprove ()

Senior Assistant Academic Registrar: _____ Date: _____
(Signature)

For Use of Academic Registry

Application received on _____ by _____

Documentary proof received on _____

Personal Data (Privacy) Ordinance

Personal Information Collection Statement

Persons who supply personal data in their applications to the Academic Registry for various purposes are requested to note the following:

1. Personal data provided in the applications are to facilitate the process of their applications and will not be used for other purposes.
2. Personal data provided will only be used by University staff.
3. After the applications have been processed, application forms will be destroyed 3 months after the process is over.

Under the provision of the Personal Data (Privacy) Ordinance, request for personal data access or correction may be made and addressed to:

Academic Registrar
Academic Registry
Room 701, 7/F, Academic and Administration Building
Kowloon Tong, Kowloon