



Academic Registry
Application for Transcript of Academic Record (Student Copy)

- (1) Please submit together with this form proof of identity document (Original or copy of HKID card/Passport or Student card).
- (2) If this form is submitted by a representative of the applicant, or the transcript is to be collected by a representative, the representative has to produce his/her own HKID card/Passport as proof of identity, an authorization letter bearing the applicant's signature and a copy of the applicant's HKID card/Passport.
- (3) Should there be any request for changes after the issuance of the transcript, a fresh application with appropriate payment will be required.
- (4) If application is submitted in person, transcripts of associate degree and undergraduate degree programmes will be available immediately after payment of transcript fee. Other than the above, please allow 5 working days for the transcript to be prepared. For applicants graduated in or before 1985, longer processing time may be needed.
- (5) Transcript fee for student copy is \$50 per copy. Application will only be processed upon receipt of payment.

Name (Mr./Ms.*) : _____ (_____)
*Please delete as appropriate (in English) (in Chinese, if applicable)

<u>Student No</u>	<u>Year Graduated</u> (if applicable)	<u>Type of Award</u> (e.g. Bachelor, Associate Degree)	<u>Programme/Major/ Department</u>	<u>Minor</u> (if applicable)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

OR
Date Withdrawn: _____

*Notes: **Postgraduate students** should apply for transcript at the Graduate School (AAB 904, 9/F, Academic and Administration Building, Baptist University Road Campus).
Students (non-graduates) of programmes listed overleaf should apply for transcript at the relevant office instead of the HKBU-Academic Registry.*

This transcript will be (Please \surd where appropriate):

- collected at the Academic Registry (Room 701, 7/F, Academic and Administration Building, Baptist University Road Campus) by the student; or by an authorized representative.
(Note: Transcript which is not collected 6 months after the issue date will be destroyed.)
- sent to _____ Office of the HKBU.
- sent to the correspondence address overleaf by
- ordinary mail (Local)/ regular air mail (Overseas) registered mail

No. of Copies Applied for: _____ Remarks: _____

Applicant's E-mail Address: _____

Applicant's Contact Tel. No.: _____

Applicant's/Representative's Signature: _____ Date: _____

To be completed upon collection of transcript

Collected by: _____ (_____)
(Signature) (Name in BLOCK letters)

HKID/Passport/Student card: Checked Date: _____

FOR OFFICE USE ONLY

Transcript fee: \$50/copy x _____ = \$ _____ Paid

Form Received by _____ on _____ HKID/Passport/Student card: Checked

Prepared by _____ Checked by _____ Completed/Mailed 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
 Baptist University Road Campus
 Hong Kong Baptist University
 Kowloon Tong
 Kowloon

Note: **Students (non-graduates)** of below programmes should apply for transcript at the relevant office, instead of the HKBU-Academic Registry:

Study Programme	Address
<ul style="list-style-type: none"> • Top-up Undergraduate Degree programmes (<i>except BCom (Hons) in Accountancy</i>) • Early Childhood Education programmes • Associate Degree programmes • Higher Diploma programmes administered by the College of International Education (CIE) 	SCE – DLB Office 4/F, David C. Lam Building, Shaw Campus Hong Kong Baptist University 34 Renfrew Road Kowloon Tong, Kowloon

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**Mailing Slip:** (A separate mailing slip is required for each address sent. Please make extra copies of the mailing slip whenever necessary.)  
 Please fill out the **Name of Applicant** and the **Name and Address of Recipient** where the transcript(s) will be sent to.  
 (To avoid postal errors, please write clearly **within border**. The Academic Registry will bear no responsibility for any loss or damages of the transcript during postal delivery.)

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Name of Applicant: \_\_\_\_\_

|                                                                       |
|-----------------------------------------------------------------------|
| Name of recipient: _____<br>Address: _____<br>_____<br>_____<br>_____ |
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