Ref No:

THE UNIVERSITY OF HONG KONG

Carol Yu Centre for Infection

Infectious Disease Courses & Postgraduate Diploma Programme

Application for Admission for Occasional Students Taking Individual Course(s)

The personal data provided in this form will be used for processing your application for enrolment on the relevant courses, by the administrative and academic departments concerned. If you wish to access or correct your personal data after submission of this form, please contact the Course Secretariat, Department of Microbiology, The University of Hong Kong, Room 26, 19/F, Block-T, Queen Mary Hospital, 102 Pokfulam Road, Hong Kong at 2255 2584, e-mail: pdipid@hku.hk, Fax: 2855 1241.

PERSONAL INFORMATIO	N		
in block letters, as in your HKII * Please delete as appropriate	O Card/passport)	irst] 	
Correspondence address:			
Telephone number:			
Fax number:	En	nail address:	
PRESENT OCCUPATION	Position held/department	Starti date	ng
	Name and addresshospital/organization		
QUALIFICATIONS			
COURSE ENROLMENT			
I wish to enrol in the following	ng course(s) (please tick):	[*Exact date to be confirmed]	
Course 5: 28-29 March 2020		Course 2: April 2021*	
Course 6: 18-19 July 2020		Course 3: July 2021*	
Course 1: November 2020*		Course 4: July 2021*	
COURSE FEE			
Bank Name:		Cheque No:	
Amount: HK\$			
Date:			
	Dr/Mr/Mrs/Ms/Miss* (Please fi in block letters, as in your HKII * Please delete as appropriate Name in Chinese characters Correspondence address: Telephone number: Fax number: PRESENT OCCUPATION QUALIFICATIONS COURSE ENROLMENT I wish to enrol in the following Course 5: 28-29 March 2020 Course 6: 18-19 July 2020 Course 1: November 2020* COURSE FEE Bank Name: Amount: HK\$	in block letters, as in your HKID Card/passport) * Please delete as appropriate Name in Chinese characters (if any): Correspondence address: Telephone number:	Dr/Mr/Mrs/Ms/Miss* (Please fill in your full name [surname first] in block letters, as in your HKID Card/passport) * Please delete as appropriate Name in Chinese characters (if any): Correspondence address: Telephone number:

This form should be completed and returned to: Carol Yu Centre for Infection, c/o Department of Microbiology, The University of Hong Kong, Room 26, 19/F, Block-T, Queen Mary Hospital, 102 Pokfulam Road, Hong Kong together with a cheque in Hong Kong dollars (\$1,000 per course) payable in Hong Kong, which must be crossed and drawn in favour of "The University of Hong Kong". For enquiries, please contact the Course Secretariat at 2255 2584, e-mail: pdipid@hku.hk. The completed application form can be returned to us by fax at 2855 1241.