

## Application for Transcript

**Please read carefully the following important notes before completing this form:**

1. **Transcript will include applicant's all academic records at HPSHCC.**
2. For EACH application, a non-refundable fee of **HK\$50 is charged for the first copy of transcript and HK\$10 for each additional copy (e.g. HK\$60 for 2 copies, HK\$70 for 3 copies).**
3. Payment of fee should be made by ATM transfer (Bank of China (Hong Kong) account no.: 012-875-0-035397-9) or in cash to the Student Services Counter on 5/F, HPSHCC (or College Office on 18/F, HPSHCC when the Student Services Counter is closed).
4. Completed application form with the original ATM Customer Advice (if applicable) should be submitted to the Student Services Counter on 5/F, HPSHCC (or College Office on 18/F, HPSHCC when the Student Services Counter is closed).
5. The normal processing time for an application is at least two weeks from the date of application (Not applicable to applications which request to show assessment results / make-up examination results / checking of assessment results yet to be released on the transcripts, such applications can only be processed when the requested results are ready.)
6. The College Office will notify applicants for collection via Learner Portal (for current students) if the transcripts are ready.
7. The College accepts no responsibility for any loss or damage of transcripts during postal delivery.

### I. Student Particulars

Full Name in English: \_\_\_\_\_

Full Name in Chinese: \_\_\_\_\_ Email: \_\_\_\_\_

Programme: \_\_\_\_\_

HKID No.: \_\_\_\_\_ Student No.: \_\_\_\_\_

Contact No.: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

### II. Academic Records on Transcript

I would like to have the following results <sup>#</sup> to be shown on my transcript: (please tick as appropriate.)

|   | <u>Semester 1</u> | <u>Semester 2</u> |
|---|-------------------|-------------------|
| Foundation/ Certificate in General Studies/ Diploma in Foundation Studies Programme |                   |                   |
| Year 1  |                   |                   |
| Year 2  |                   |                   |

<sup>#</sup> **Transcript will include all your academic records at HPSHCC** (i.e. including the records of Foundation/ Certificate in General Studies/ Diploma in Foundation Studies Programme, if applicable).

If you have applied for **make-up examination(s) / checking of assessment results**, please indicate:

☐ I would like to **wait** for my make-up examination results / checking of assessment results <sup>^</sup> so that such results can be shown on my transcript(s).

<sup>^</sup> the processing time takes at least 4 weeks after attending the make-up examination(s) / submission of the application for the checking of assessment results.

### III. Copies Required

Total number of transcript(s) applied for: \_\_\_\_\_ Total amount: HK\$ \_\_\_\_\_

#### IV. Collection Method

Please tick as appropriate, you may choose more than one options:

- ☐ Please send the transcript(s) to the name(s) and address(es) listed on part VIII of this form by mail.
- ☐ I wish to pick up the transcript(s) at the HPSHCC Office.
- ☐ I will authorize \_\_\_\_\_ (name) whose HKID No. is \_\_\_\_\_ to collect the transcript(s) on my behalf.

#### V. Declaration

I have fully read the important notes above and accept the regulations on the application for transcripts. I understand that no amendment can be made after submission of this application form.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

#### VI. Acknowledgement of Receipt (*to be completed upon collection*)

I hereby confirm that I have received the correct number of transcript(s).

\_\_\_\_\_  
Signature of Student/  
Authorized Person

\_\_\_\_\_  
Date of Collection

#### VII. For College Use

|                                 | By | Date |
|---------------------------------|----|------|
| Receipt Issued (No. _____ )     |    |      |
| Transcript Issued               |    |      |
| Validation                      |    |      |
| Date Sent to SPACE's Registry   |    |      |
| Date Sent to Applicant          |    |      |
| Date Sent to Designated Address |    |      |

**VIII. Supplementary Mailing List** *(to be completed if you would like to receive the transcript(s) by mail)*

***Mail to:***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Address#1

Number of copies to this address: \_\_\_\_\_

Please specify attachment (if any):

\_\_\_\_\_

***Mail to:***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Address#2

Number of copies to this address: \_\_\_\_\_

Please specify attachment (if any):

\_\_\_\_\_

***Mail to:***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Address#3

Number of copies to this address: \_\_\_\_\_

Please specify attachment (if any):

\_\_\_\_\_

***Mail to:***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Address#4

Number of copies to this address: \_\_\_\_\_

Please specify attachment (if any):

\_\_\_\_\_

***Mail to:***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Address#5

Number of copies to this address: \_\_\_\_\_

Please specify attachment (if any):

\_\_\_\_\_