THE UNIVERSITY OF HONG KONG
FACULTY OF SCIENCE

For **4**-Year Curriculum

Application for Leave of Absence and Transfer of Credits for
BSc / BSc(ActuarSc) Outgoing Exchange/Visiting Students

(Academic Year : _____-_____)

IMPORTANT NOTES:

1. This form should be submitted to the Faculty Office, with all supporting documents attached, at least <u>1 month</u> before the date of departure.

2. The Dean, on the recommendation of the Department concerned, would consider your application for transfer of credits. Transfer of credits is conditional upon your successful completion of the approved courses.

3. Students should not change the applied list of courses for credit transfer and the applied equivalent course at HKU afterwards **UNLESS** you cannot take such course(s) eventually at your host institution. In such case, you should inform the Faculty by the end of the add/drop period at your host institution for any change of your applied list of courses [including applying new course(s) for credit transfer, dropping applied course(s) and change of equivalent course(s) at HKU for applied course(s)] for approval by the Dean. Any changes in credit transfer application after 1 month of the commencement of exchange/visiting semester will **NOT** be considered.

4. Credits transferred are not included in the calculation of GPA. Only the examination results obtained from this University will be used to determine the honours classification. The Board meets in late June each year to determine honours classification.

Part I : General Information

Name : _____(_____) Programme of study: _____ University No :_____Year of Admission to BSc : _____Current Year of study : <u>1 / 2 / 3 / 4</u> *
English in BLOCK Letters   Chinese, if appropriate

Intended Major & Minor : <u>Major(s) in</u> _____ (Major 1) _____ (Major 2) <u>Minor(s) in</u> _____ (Minor 1) _____ (Minor 2)

Contact Telephone Number : _____ Email address : _____ Period of exchange/visiting : _____ [Period of leave of absence to be applied: (MM/YY - MM/YY)]

Host Institution and Country : _____ Duration : <u>1st semester / 2nd semester / Summer Semester / 1 year</u> *

* delete as appropriate

Part II : Application for Leave of Absence and Credit Transfer *(Please ✓ wherever appropriate)*

☐ I wish to apply for leave of absence for my exchange/visiting period, but do NOT wish to apply for transfer of credits to be taken at the host institution. (**Go to Part IV**)

☐ I wish to apply for leave of absence for my exchange/visiting period and wish to apply for transfer of credits to be taken at the host institution.
I would like to apply for _____ credits of transfer to the HKU BSc / BSc(ActuarSc) degree. (**Go to Part III**)

Part III : Course information of host institution ※

(A) The following details are required for the Faculty to process your application for transfer of credits. You may need to contact the host institution for such details.

Duration of the undergraduate degree curriculum: _____ years   Number of semesters/terms in each academic year: _____   Start date of semester/term: _____

Number of teaching weeks: _____in each semester/term ; _____in each year   Standard semester/term study load (credit/unit): _____   Number of credits required for graduation (credit/unit): _____

Approximate number of contact hours of each credit / unit of course : _____   Deadline of course add/drop period :_____   Expected date of announcement of examination results: _____

※ **Supporting documents (with source link), such as course handbook, syllabuses, from the host institution must be attached, otherwise your application for transfer of credits cannot be processed.**

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Part III : Course information of host institution ※

(B) Indicate your proposed study plan at the host institution and the credits/units of each course at the host institution by filling in columns (a) – (f). As you may not be approved by your host institution to take all the courses, you are advised to also indicate your reserve courses. You are advised to discuss with the Head of Department or his/her representative to consider what courses should be taken at the host institution before completing this Part.
(Note: Students of 4-year curriculum cannot transfer course which is equivalent to 3-year curriculum course at HKU.)

	(a)	(b)	(c)	(d)	(for department use only)	(e)	(f)	(for department use only)	(for department use only)
	Course code	*Course title*	*Credit/ unit*	*Equivalent # course at HKU*	*Departmental Approval*	*Fulfillment of Curriculum Requirement at HKU (Programme/Major/Minor/ Common Core/Electives)*	*Curriculum Component of Programme/Major/Minor in (e) (Disciplinary Core/ Disciplinary Elective/ Capstone)*	*Departmental Confirmation*	*Signed by Head of the Department*
e..g.	*MATHXXX*	*Multivariable Calculus*	*6*	*MATH2211*	Yes / No*	*Mathematics (Major)*	*Disciplinary Core*	Yes / No *	
1					Yes / No*			Yes / No *	
2					Yes / No*			Yes / No*	
3					Yes / No*			Yes / No*	
4					Yes / No*			Yes / No*	
5					Yes / No*			Yes / No*	(Dept:)
6					Yes / No*			Yes / No*	Date:
Only for student who participates in year-long exchange/visiting:									
7					Yes / No*			Yes / No*	
8					Yes / No*			Yes / No*	
9					Yes / No*			Yes / No*	
10					Yes / No*			Yes / No*	
11					Yes / No*			Yes / No*	(Dept:)
12					Yes / No*			Yes / No*	Date:
Reserve courses:									
1					Yes / No*			Yes / No*	
2					Yes / No*			Yes / No*	(Dept:)
3					Yes / No*			Yes / No*	Date:

 # You should try to identity an exact equivalent course at HKU as far as possible. If similar course is not offered at HKU, please indicate the relevant discipline and level of course (e.g. Mathematics advanced level course).
*delete as appropriate
*※**Detailed syllabuses of the above courses must be attached to this form.***

Part IV : Declaration

I accept that the information provided will be used in matters relating to my application for credit transfer. As part of this exercise, it may be necessary to disclose details to internal departments authorized to process the information.

Signature : _____   Date : _____

FOR DEPARTMENT USE ONLY

Part V : Comment   *(To be completed and returned to the Faculty Office by_____)*
Comment from the Course Offering Department, if any [Part III (B) refers]:

Signature :_____   (Head of Department of _____)   Date :_____