Support from Home University/Institution

Please upload the completed form to the Online Admission System to complete your application.

Part I Appli	ication Particulars				
Name					
Application N	No.				
Type of Short-term Study		Visiting Res	earch Student		
Hosting Thru	st at HKUST(GZ)				
Proposed Visiting Period					
		(de	d/mm/yyyy)	(dd/mm/yyyy)	
Part II Curr	ent Program of Postgradua	te Study			
Name of Univ	versity/ Institution				
Student No.					
Program of Study (e.g. MPhil in Chemistry)					
Part III Support from Home University/ Institution					
(To be compl	leted by the Registrar/ Dean of	School / Dean	of Faculty)		
1. I am in support of the student's application for Short-term Study at HKUST(GZ)					
☐ with Visiting Period stated in Part I above.					
☐ with Visiting Period not exceedingmonths/days fromto					
I confirm that the student will remain as an enrolled student of his/her current program at the Home University/ Institution during the Visiting Period.					
3. The medium of instruction of the current program the student studying is:					
☐ English					
other language (please specify:)					
Signature			University Stamp		
Name			Date		
Position	☐ Registrar ☐ Dean	of School	☐ Dean of Faculty		
		Please specify (e.g. Dean of Engineering):			