THE CHINESE UNIVERSITY OF HONG KONG

FACULTY OF EDUCATION HONG KONG INSTITUTE OF EDUCATIONAL RESEARCH

Room 204, Ho Tim Building, Shatin • NT • HONG KONG • TEL (852) 3943 6999; (852) 3943 6755 • FAX (852) 2603 6850

APPLICATION FOR TRANSCRIPT OF ACADEMIC RECORD/ CERTIFYING LETTER/ CERTIFYING DOCUMENT

(Please read the Notes for Application before completing	this form.)		
Document apply for (Please tick as appropriate):			
Academic Record (Transcript)	Certifying Letter		Certifying Document
Name (in English):	(in Ch	inese):	
Programme:			
HKID Card No. #:	Study Year/Year of G	raduation*:	
Correspondence Address:			
Contact Tel. No.:	No. of Copie	s:	
Purpose of Application:			
Method of Despatch (Please tick as appropriate):			
I will collect the transcript(s)/certifying let	ter(s)/certifying docum	nent(s)* in po	erson.
The transcript(s)/certifying letter(s)/certify the letter attached.	ing document(s)* will	be collected	by the person authorized in
Please send the transcript(s)/certifying let ordinary air mail. (For mail despatch, please fill in the addr letter(s)/certifying document(s) is/are to be you prefer.)	ress slip for each add	ress to which	h your transcript(s)/certifying
Signature:	Date:		
# The HKID Card no. is for verification of the identity of * Please delete as appropriate.	the applicant.		
FOR OFFICE USE ONLY			
Fee for Transcript(s)/Certifying letter(s)/Certifying	document(s) : \$		
Postage	: \$		
Total	: \$		
Receipt No. /Rec	ceipt attached		
Document(s) collected on		_ by	1 1 0 0
04/2025		(1	Applicant's Signature)

04/2025

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ADDRESS SLIP

	Date:
	address box below the name and address of the office, firm o ipt(s)/certifying letter(s)/certifying document(s) is/are to be sent.)
Name:	
Address:	
	copy/copies of transcript(s)/certifying letter(s)/certifying request of who is applying for
studies in	
a position of	
	er(s)/certifying document(s)* will be sent locally by mail or oversorefer other postal services, please tick the appropriate box below:
Registered Mail	
Others	(please specify)
* Please delete as appropriate.	

Notes for Application for Transcript/Certifying Letter/Certifying Document:

- 1. Fill in all the required information on the application form. Application will be processed upon receipt of the completed application form and payment.
- 2. Payment Method:

Applicants may send a personal cheque or bank draft made payable to "The Chinese

University of Hong Kong". Applicants can also pay via ATM or E-banking:

Bank Name: Hang Seng Bank Limited

Account Name: The Chinese University of Hong Kong

Account No.: 293-005005-001 (HKD)

3. Completed Application Form and Bank-in slip can be sent via email: hkier-trainingA@cuhk.edu.hk

4. Fee Schedule:

Fees per copy including local postage or ordinary air mail

(effective August 1, 2020):

Transcript HK\$150 Certifying Letter HK\$150 Certifying Document HK\$80

If you require other postal service, please add additional charges:

Registered Mail HK\$15.5 (per mail item)

Others Refer to the rates at Hong Kong Post www.hongkongpost.hk

- 4. If you wish to authorize another person to apply and/or collect transcript(s)/certifying letter(s)/certifying document(s) on your behalf, please submit a letter of authorization along with the application, stating the HKID Card or Passport No. of the authorized person. Photocopy of your HKID Card and the authorized person's HKID Card or Passport will be required for verification. Photocopy of your HKID card will be returned after inspection.
- 5. Collection of document(s) in person or by a nominated person must be done within one month from the date of application.
- 6. For mail despatch, please fill in the address slip for each address to which your transcript/certifying letter/certifying document is to be sent.
- 7. The Hong Kong Institute of Educational Research accepts no responsibility for any loss or damage of the transcript(s)/certifying letter(s)/certifying document(s) during postal delivery.
- 8. Personal Information Collection Statement:
 - a. The personal data provided on this form will be used by the Hong Kong Institute of Educational Research for the purpose of processing this application. All information provided, when no longer required, will be destroyed.
 - b. For correction of or access to the personal data after submission of this form, please contact the Office of the Hong Kong Institute of Educational Research.
 - c. Information provided on this form may be transferred to other departments/administrative units within CUHK for consideration and granting approval, where applicable.
- 9. For enquiries, you can contact us by:

Tel. No.: (852) 3943 6999; (852) 3943 6755

Fax No.: (852) 2603 6850

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