| HKUST Logo in Gold and Blue | **The Hong Kong University of Science & Technology****Funding Scheme for Student Activities on Special Educational Needs****Application Form (2019 - 2020)** |
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| **Section I. Student(s) Particulars** |
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| 1. | Name of Student Group/Organization:  |  |
| 2. | Name of Project Leader: | (in English) | (in Chinese; if applicable) |  |
|  | Program: |  | Year of Study: |  |
|  | HKUST Email: | @connect.ust.hk | Mobile Phone No.: |  |
|  |  |  |  |  |
| 3. | Organizing Committee of the Project: (Use separate sheet if necessary – Appendix # )

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Position orRole |  | Name in Full |  | Program andYear of Study |  | HKUST/University Email |  | Mobile Phone No. |
|  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |
| 4. | Faculty / Staff Advisors of the Project: (if applicable)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name in Full |  | Department / Office |  | HKUST Email |  | Endorsement / Signature of Faculty/Staff |
|  |  |  |  | @ust.hk |  |  |
|  |  |  |  | @ust.hk |  |  |

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| **Section II. Project Details** |
| --- |
| 1. | Name of Project:  | (in English) |  |
|  |  | (in Chinese; if applicable) |  |
| 2. | Project Venue(s): |  |
| 3. | Project Time Frame: | from | (DD) | (MM) | (YYYY) | to | (DD) | (MM) | (YYYY) |
| 4. | Project Proposal and Work Schedule: | Appendix No.: |  | (Please see Application Guide and Template.) |

| **Section III. Budget Estimation (For Project Type I only)** |
| --- |
| **Income:** | HK$ |
| 1. | Contribution by Project Team |  |  |
| 2. | Contribution by Participants |  |  |
| 3. | Subsidy from other sources  | (please specify: |  | ) |  |
|  |  |  | 1. **Total Income:**
 |  |  |
|  |  |
|  |  |
| **Expenditure:** | HK$ |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |
|  | **(b) Total Expenditure:** |  |  |
|  |
|

|

| **Additional Subsidy Requested to Support the Project:** | **(b) – (a) HK$:** |  |
| --- | --- | --- |
| Please note:The funding level depends on the merits of the activity/project proposed. A successful application will be granted up to (1) full coverage of the total expenses of the project or activity; or (2) HK$20,000, whichever is lower. |

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| **Section IV. Declaration**  |
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| 1. | Other financial support received / currently applied for (please check (✓) as appropriate): |
|  |  | I have not applied for or received any other funding to support the proposed project. |
|  |  |
|  |  | I have applied for or am applying for the following funding to support the proposed project: |
|  |  | Organization: |  | Amount (HK$): |  |
|  |  |
|  |  | I have received / have successfully applied for the following funding to support the proposed project: |
|  |  | Organization: |  | Amount (HK$): |  |
|  |  | Other Details / Conditions: |  |
|  |  |  |  |
| 2. | I hereby declare that the information given in this application package is accurate and complete to the best of my knowledge. Any misrepresentation will disqualify this application for the Scheme. |
|  |  |
| 3. | I have read the “Application Guide” carefully and agree to abide by the procedures and regulations as specified in the Guide. |
|  |  |
| 4. | I understood that the information provided in this application package will be used for verifying the eligibility for the Scheme, and may be used for compilation of statistical data. |
|  |  |
| 5. | I authorize HKUST to obtain, and the relevant parties to provide, confirmation of any and all information as stated on this application package if deemed appropriate. |
|  |  |
| 6. | I am aware that under no circumstances should the proposed project be used for political, religious or commercial purposed. Publications and audio/visual materials relating to the proposed project should not infringe copyright or intellectual property rights and shall not be produced for sale. |
|  |  |
| 7. | I understood that, if my application for the Scheme is successful, I am requested to complete and submit a project report, related supporting documents and original receipts to SEN Support, Counseling & Wellness Center, Dean of Students’ Office within two weeks upon completion of the proposed project. Failing to do so may result in delay of subsidy reimbursement until the report is fully completed. |
|  |  |
|  | Signature of Applicant: |  | Date: |  |

**Use of Personal Data**

For data collected from or generated by the Dean of Students’ Office or applicants during the Scheme’s application process, the University pledges to meet the standard of personal data privacy protection, in complying with the requirements of the Personal Data (Privacy) Ordinance. Data collected will be kept confidential, and they may be transferred to departments / administrative offices within HKUST or the University Grants Committee, if any, for processing and use. For further details on the University’s Privacy Policy, please visit: <http://www.ust.hk/privacy-policy/>.

| HKUST Logo in Gold and Blue | **The Hong Kong University of Science & Technology****Funding Scheme for Student Activities on Special Educational Needs****Application Form – Proposal (2019 - 2020)** |
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| **Appendix** |  | **: Project Proposal** |
| --- | --- | --- |
| 1. | Name of Project:  | (in English) |  |
|  |  | (in Chinese; if applicable) |  |
| 2. | Project Time Frame: | from | (DD) | (MM) | (YYYY) | to | (DD) | (MM) | (YYYY) |
| 3. | Number of Participants: | (student members) |  |
|  |  | (service targets) |  |
|  |
| 4. | For Project Type I: Project Objectives / For Project Type II: Relevant arrangement to accommodate participants with disabilities: |
|  |  |
|  |  |
| 5. | Based on the stated project objectives, what do you expect each of the following parties will learn and be able to do as stated in #4? |
|  | 1. Organizing Committee
 |
|  |  |
|  | 1. Student Members
 |
|  |  |
|  | 1. Service Targets
 |
|  |  |
|  |  |

| 6. | Work Schedule | Appendix |  |  |
| --- | --- | --- | --- | --- |
| 7. | Project Run-down: (Use the following template; or separate sheets as appropriate; Appendix  |  | ) |
|  |  |
|  |

| EVENT # |
| --- |
| Event Date: | (DD) | (MM) | (YYYY) |
| Event Time: | from |  | to |  |
| Event Venue: |  |
| Person-in-charge: |  |
| Proposed no. of student members: |  |
| Proposed no. of service targets: |  |
| Proposed event content: |  |

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|  |  |
| 8. | How would you measure the achievement and effectiveness of the stated in #4? |
|  |  |
|  |  |