

**Sir Edward Youde Memorial Fellowship
for Disabled Students 2024/25
Nomination Report**

PART I

(A) Personal Data

1. Name in English (Mr / Ms / Miss) : _____
(in block letters, as shown on HKID card)

Name in Chinese (if applicable) : _____

2. Hong Kong Identity Card No. (**Copy of which should be attached**): _____

3. Year of Birth : _____

4. Nationality : _____

5. Years of Residence in Hong Kong as at 1.9.2024 : _____

6. Home Telephone No. : _____

7. Mobile Phone No. : _____

8. E-mail Address : _____

9. Correspondence Address :

10. Residential Address (if different from the correspondence address given above) :

11. Previous and Present Occupation, if any : _____
(Please specify employment period)

(B) Details of Research Programme

1. Institution : _____

2. Faculty / Division / Department : _____

3. Degree Being Pursued : _____
(Copies of admission letter and official transcript (if available) should be attached)

4. Field of Study : _____

5. Research Topic : _____

6. Year of Study : _____

7. Course Duration : _____

8. Commencement Date of Current Study Programme : _____

9. Expected Completion Date of Current Study Programme: _____

(C) Academic Background

1. Academic Achievements and Professional Qualifications:

(Please give details such as class of honours and subjects taken in chronological order.)

(Copies of supporting document(s), such as certificate(s), result slip(s) and official transcript(s) (including those of current studies) should be attached)

Name of Institution	Degree / Qualification Attained	Year of Award

2. Particulars of Previous Research Work for a Degree, if any:

Publication / Title of Thesis	Degree	Date

3. Scholarships and Awards:

(Please give details of any fellowships, scholarships, studentships, bursaries and awards previously received or currently being granted in connection with the research and specify the issuing authority and value of the awards. The successful candidate will not be required to relinquish fellowships, scholarships or awards concurrently held by him / her.)

(Copies of supporting document(s), such as certificate(s) should be attached)

Name of Award (including Sir Edward Youde Memorial awards)	Issuing Authority	Value of Award	Date

(D) Extra-curricular Activities / Community Services

List in chronological order the extra-curricular activities / community services participated **in the past five years:**

Activity / Service	Position Held / Attainment	Date

(E) Particulars of Special Educational Needs¹

1. Type of Special Educational Needs:

2. Severity of Special Educational Needs:

(Please attach the most recent medical report and supporting document such as assessment report issue by Education Bureau or approval letter of disability allowance. Candidates may be required to attend an assessment)

(F) Further Information

Please give an account of, in **not more than 500 words**, preferably in English, the reasons for conducting the research.

¹ Students with special educational needs include those having physical disabilities, visual impairment, hearing impairment, speech and language impairment, attention deficit / hyperactivity disorders, specific learning difficulties, autism spectrum disorders, intellectual disabilities and / or mental illness.

(G) Notes on Handling of Information and Personal Data
(To be signed by the nominated candidate)

The Sir Edward Youde Memorial Fund Council (the Council) is serviced by the Student Finance Office (SFO), Working Family and Student Financial Assistance Agency (WFSFAA) of the Government of the Hong Kong Special Administrative Region (HKSARG). The data in the nomination form is provided by the candidate voluntarily. The candidate may be asked to provide additional information to facilitate the Council to process the nomination.

Declaration

I have read the Information Note of the Sir Edward Youde Memorial Fellowship / Scholarship for Disabled Students 2024/25. I fully understand and agree to the arrangements stated therein in relation to my nomination. I undertake and warrant that I shall comply with all provisions in the Information Note as may be revised by the Council from time to time and such other requirements and directions as specified from time to time by the Council.

I (Name of Nominee) hereby declare that -

- (a) The information given in the nomination form, all the supporting documents and information provided in relation to my nomination, to the best of my belief, is true, complete and correct.
- (b) I understand and consent that the information provided in relation to my nomination may be provided to the SFO of the WFSFAA and other bureaux / departments of the HKSARG for purposes relating to the selection exercise as may be necessary.
- (c) I attach herewith / will submit the supporting documents to the Council Secretariat as stipulated in the nomination form.

Nominee's Signature

Date

PART II

Confidential Report on the Candidate

(Completed on behalf of the Dean of Faculty or Head of Division / Department)

Please note that the candidate has the right of access to the assessment provided by you in accordance with the provisions of the Personal Data (Privacy) Ordinance.

In support of the nomination, please provide a report on the candidate with reference to –

- (a) the strategic importance of the research to the social, economic and technological development of Hong Kong;
- (b) whether the research work duplicates any other work that has been or is being done in Hong Kong;
- (c) whether the research is likely to be completed within two years for a master's degree or three years for a doctoral degree;
- (d) the intellectual qualities and research potential of the nominee;
- (e) the personal qualities and potential of the nominee including his / her expected future contribution to Hong Kong; and
- (f) any special considerations which have led to the candidate's nomination.

Declaration (Completed on behalf of the Head of Institution)

I hereby declare / confirm that:

- the nominated candidate has given his / her consent for nomination and the statements made in Part I of this nomination form including all the related documents provided are, to the best of his / her belief, true, complete and correct;
- the candidate has read the Information Note D. He / She fully understands and agrees to the arrangements stated therein in relation to his / her being nominated;
- the candidate indicates high promise of academic capacity for undertaking the higher degree by research. I also certify that the particulars stated in this nomination form are correct to the best of my belief and that the candidate is undertaking a full-time University Grants Committee (UGC)-funded / publicly-funded postgraduate research programme.

Name : (Mr / Ms / Miss)

Position : _____

Institution : _____