

## Application for Credit Transfer (SGS54) (for Professional Doctorate Students Only)

**Notes:**

1. Students who possess postgraduate or other qualifications of relevance to their professional doctorate programme may apply for credit transfers. Normally, credit transfers will only be granted for previously completed units of study that can be demonstrated as contributing to the student's total programme of study. Please refer to the web site of your study programme for its detailed credit transfer requirements.
2. Applications for credit transfer for qualifications attained prior to entry to the programme must be made within the first semester following the student's admission and before the deadline set by the University for the relevant course(s). Applications for credit transfer for qualifications attained after admission to the programme must be made immediately in the semester following attainment of the additional qualification.
3. **Please note that individual professional doctorate programmes have set their own maximum number of credit units of taught courses allowable for credit transfer:**

Programme	Maximum No. of CUs Allowable for Credit Transfer
Doctor of Business Administration [DBA]	6*
Doctor of Juridical Science [JSD]	12
Doctor of Juridical Science (Chinese Judges) [JSD(CJ)]	12
Engineering Doctorate (Engineering Management) [EngD(EM)]	12

4. **Please note that separate applications are required for request of credit transfer from academic qualifications attained at different institutions.** A non-refundable fee of \$140 will be charged for each application form submitted. The application fee can be settled at any branch of the Hang Seng Bank by using a bank-in-slip issued by the Chow Yei Ching School of Graduate Studies (**CityU Account No.: 293-318028-003**).
5. Students should complete Sections A and B, and submit the completed form to the Chow Yei Ching School of Graduate Studies (SGS), **together with (a) the fee payment receipt, (b) a copy of the relevant transcript and (c) the syllabus of courses which are not offered by CityU, if applicable.**
6. Students should not take the courses for which transfer credits have been granted. For students who are taking a course and for which credit transfer is subsequently approved, SGS will arrange to de-register them from the course. JSD/JSD(CJ) students are advised to pay special attention when they are making course registration on-line.

\* *50% of elective component (7 CUs for cohort 2012 – 2015 while 6 CUs for cohort 2016 and thereafter)*

**Applicants should complete Section A and Section B**

### Section A Student's Particulars

Student Name: \_\_\_\_\_ Student No.: \_\_\_\_\_

Programme: \_\_\_\_\_ Contact Phone No.: \_\_\_\_\_

**Total Credit(s) Previously Approved for Transfer:** \_\_\_\_\_ CU **Year of Study:** \_\_\_\_\_

### Section B Details of the Application

#### Information on Transfer Institution

Name of Institution:	
Attendance Period:	
Level of Award:	

**Details of Credit Transfer**

CityU Equivalent Course(s)			Course(s) in Transfer Institution [ Please attach (a) a copy of the relevant transcripts and (b) the syllabus of courses which are not offered by CityU, if applicable ]			
Course Code	Course Title	CUs	Course Code	Course Title/Description	Credits	Grade
e.g. N/A	Elective 1	3	BCD5771	Principles of Marketing	3	B+

For office use:  
 Comment of Course Examiners: Supported / Not supported \*      Signature: \_\_\_\_\_

Course Code	Course Title	CUs	Course Code	Course Title/Description	Credits	Grade

For office use:  
 Comment of Course Examiners: Supported / Not supported \*      Signature: \_\_\_\_\_

Course Code	Course Title	CUs	Course Code	Course Title/Description	Credits	Grade

For office use:  
 Comment of Course Examiners: Supported / Not supported \*      Signature: \_\_\_\_\_

*\*Please delete as appropriate*

\_\_\_\_\_  
 Signature of Student

\_\_\_\_\_  
 Date

**Please pass the form to SGS for processing.**

**Section C Recommendation by the Supervisor/Programme Leader/Programme Director**  
*(\*Please delete as appropriate)*

I support/do not support\* the application.

Comments: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

**Please pass the form to the Department Head/School Dean/College Dean for approval.**

**Section D Decision by Department Head/School Dean /College Dean** *(\*Please delete as appropriate)*

I approve/do not approve\* the recommendation of the programme leader/programme director.

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
 Signature of Department Head/School Dean/College Dean

\_\_\_\_\_  
 Date

**Please return the form to SGS**