

Chow Yei Ching School of Graduate Studies Research Degree and Professional Doctorate Programmes 4/F, Fong Yun-wah Building, Tat Chee Avenue, Kowloon, Hong Kong Tel No. +852 3442 9076 Email sg@cityu.edu.hk Fax No. +852 3442 0332 Website www.cityu.edu.hk/sgs

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

	Course(s) in Transfer Institution							
CityU Equivalent			[Please attach (a) a copy of the relevant transcripts and (b) the					
Course(s)			syllabus of courses which are not offered by CityU, if applical					
Course Code	Course Title	CUs	Course Code	Course Title/Description	Credits	Grade		
e.g.			Couc					
N/A	Elective 1	3	BCD5771	Principles of Marketing	3	B+		
For office u	ise:							
Comment o	f Course Examiners: Supp	orted /	Not supporte	d * Signature:				
Course	Course Title	CUs	Course	Course Title/Description	Credits	Grade		
Code			Code	_				
For office w								
For office u	ise: f Course Examiners: Supp	ortad /	Not supporto	d * Signatura				
			••					
Course	Course Title	CUs	Course	Course Title/Description	Credits	Grade		
Code			Code					
For office u	ise:		•	•				
Comment o	f Course Examiners: Supp	orted /	Not supporte	d * Signature:				
* Dl d -	1-4							
*Please ae	lete as appropriate							
	Signature of Student			Date				
	Signature of Student			Duit				
	Pleas	e pass	the form to SO	GS for processing.				
		Super	visor/Prograi	mme Leader/Programme Dire	ctor			
(*Please d	elete as appropriate)							
I support/d	o not support* the application	on.						
a i								
Comments	:							
Signature:				Date:				
-								
Name:								
		D						
Section D				School Dean/College Dean for app		ata)		
Section D	Decision by Department I	reau/S	School Dean /	/College Dean (*Please delete d	is appropri	ule)		
I approve/do not approve* the recommendation of the programme leader/programme director.								
r approve, do not approve the recommendation of the programme reader/programme director.								
Comments:								
Signature of Department Head/School Dean/College Dean Date								