**The Chinese University of Hong Kong**

**Office of Student Affairs**

**Wellness and Counselling Centre**

**SEN Service**

**Sponsorship for SEN-related Staff Training Programme**

**Application Form**

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| 1. **Information of Applicant** | | | | | | |
| Name of Applicant: | |  | | | Department / Unit: |  |
| Post: | |  | | | Contact No.: |  |
| Email: | |  | | | | |
| 1. **Details of the proposed Staff Training Programme**   *(Please submit a copy of the poster / leaflet if available.)* | | | | | | |
| Name of the Programme: | | |  | | | |
| Date and Time: | | |  | | | |
| Programme Nature:  *(Please “✓ ” all that are applicable)* | | | □ Talk / Seminar  □ Workshop  □ Others, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Estimated Cost of the Programme: | | | |  | | |
| Availability of other funding or sponsorship for this Programme: *(Please “✓ ” as appropriate)*  □ No □ Yes, please specify source and amount of funding: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| Amount of funding applied for the Programme: | | | | |  | |
| 1. **Endorsement by Department/ Unit Head** | | | | | | |
| Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Department Stamp: | |
| Signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Date : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

***Please submit the completed application form together with a brief proposal two months prior to the programme to:***

SEN Service, Office of Student Affairs

3/F, Pommerenke Student Centre,  
Wellness and Counselling Centre (OSA),

The Chinese University of Hong Kong

Enquiry:

SEN Service, Office of Student Affairs

Tel.: 3943 5441 Email: sens@cuhk.edu.hk

Address: 3/F Pommerenke Student Centre, Wellness and Counselling Centre (OSA), The Chinese University of Hong Kong

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| **This part to be completed by the Office of Student Affairs** |
| 1. **Application Result** |
| □ Application approved, with the approved sponsorship amount of HK$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_  □ Application not approved  Comments, if any: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: 　　　/ 　 / Signature:  ( dd / mm / yy ) Acting Director of Student Affairs |

***Notes for Reimbursement:***

Please submit the following items to SEN Service, Office of Student Affairs **within one month after the training programme** for payment arrangement.

❑ Brief report of the programme

❑ Attendance record of the programme

❑ Proof of payment of the costs involved

❑ Interdepartmental transfer form with relevant information of College / Faculty / Department filled

*Aug 2022*