Hsin Chong - K.N. Godfrey Yeh Education Fund for Joint Student Projects

Application Form 2025 – 26 (1st Round)

(Please type or write clearly in black)

1. Name of Proposed Project _____

2. Project Period
   From _____(DD/MM/YYYY) To_____(DD/MM/YYYY)

3. Amount of Subsidy Applied (HK$) _____

4. Amount of Subsidy Approved by Other Organisations / Under Application (HK$) _____

5. Particulars of Project Leader

   Full Name _____ Student No. _____

   Society Being Represented & Position (if relevant) _____

   Institution & Faculty / Department _____

   Course & Year of Studies _____

   Address_____

   Contact Telephone No. _____ Email _____

6. Particulars of the Second Contact Person

   Full Name _____ Student No. _____

   Society Being Represented & Position (if relevant) _____

   Institution & Faculty / Department _____

   Contact Telephone No. _____ Email _____

_____	_____	_____
Signature of Project Leader	Chop of Society (if applicable)	Date

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Please attach a proposal which gives details of the following:

A. Particulars of Project Organisers
   - For Student Societies: Name of societies and respective institutions
   - For individuals: Name of students with respective institutions, faculties / departments, course and year of studies, address, contact number and email

B. Particulars of the Proposed Project
- Objectives, methods of achieving the objectives, proposed dates, proposed venue (if conducted locally), destination & itinerary (if conducted abroad), details of target participants (no. of students & staff from each institution, other participants), contribution to the promotion of student activities and student services in general.

C. Budget plan (subsidies expected from Hsin Chong, other subsidies approved by other organisations or under application, other sources of income and expenditures in details)

Completed application form together with the detailed proposal should be sent to the **Student Support & Activities, Dean of Students' Office via email at ssa@ust.hk.** For enquiries, please contact Ms. Rainie Yeung at ssa@ust.hk or 2358 6045.

7. To facilitate the consideration of Selection Committee, please invite your advisor to comment on the proposed project.

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_____

Name of Advisor _____ Tel. No. _____

Position _____

Faculty / Department _____ Institution / Organisation _____

Signature _____ Date _____

8. Recommendation by staff of the Office of Student Affairs of the institution in which the project leader is studying.

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_____

_____

Name of Staff _____Tel. No._____

Position_____University/Institution_____

Signature _____ Date _____

(Personal data collected will comply with the requirements of the Personal Data (Privacy) Ordinance. All data will be securely stored and used solely for its intended purposes. The application form and supporting documents will not be returned and will be kept for a maximum of seven years for accounting purposes.)