THE UNIVERSITY OF HONG KONG

Master of Science in Urban Planning (ADB Scholarship)

SUPPORTING DOCUMENTS

Please post the following required documents directly to the Faculty of Architecture, The University of Hong Kong, Pokfulam Road, Hong Kong by the application deadline. Your application number should be marked on each document. Transcripts, diplomas, certificates and other submitted documents which are not in English should be accompanied by a certified translation in English. Certified translation may be provided by your home institution.

Enclosed (Please tick as appropriate.)

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<td>☐</td>
<td>Originals or certified true copies of academic transcripts#. You may complete the Transcript Request Forms below and send it to the institute from which the transcript is requested, if applicable.</td>
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<tr>
<td>☐</td>
<td>TOEFL/IELTS* official score report (if appropriate).</td>
</tr>
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<td>☐</td>
<td>Referee’s Report (Please use the standard form below. Applicants should nominate one academic and one professional referee. Undergraduates with no working experience can nominate two academic referees. Referees’ reports constitute a very important part of the assessment. Friends and relatives’ reference letters will NOT be considered.)</td>
</tr>
<tr>
<td>☐</td>
<td>List of publications (if appropriate)</td>
</tr>
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<td>☐</td>
<td>Original Statement of Proof that the language of instruction is conducted entirely in English (if appropriate)</td>
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<td>☐</td>
<td>Correspondence address labels (see below)</td>
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<td>☐</td>
<td>Information Sheet</td>
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<td>☐</td>
<td>Certificate of Annual Income</td>
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<td>Documentary Evidence for family financial details</td>
</tr>
<tr>
<td>☐</td>
<td>Applicant’s Income Information</td>
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</table>

# Please note that the University will only ACCEPT originals or copies of the documents that have been duly declared as true copies before a notary public (e.g. a Commissioner for Oaths at a City District Office in Hong Kong). Copies of documents may be certified by the appropriate officials of your home institute if you are an overseas applicant. No photocopies will be accepted.

*Please delete as appropriate. Please note that the University’s TOFEL code is 9671.
THE UNIVERSITY OF HONG KONG

Transcript Request Form

I. To the Applicant: Applicants who did not attach their original official transcript, should complete the first part of this form and send it to the appropriate officer of institute from which the transcript is requested.

Name of Applicant: ______________________ (________________) in English (Chinese, if any)

University/College Attended: ________________________________

Dates of Attendance: From _______________ To _______________

Title of Degree/Diploma: ______________________ Date of Award: ________

Programme applied for admission at The University of Hong Kong:

Master of Science in Urban Planning for ADB Scholarships (Full-time)

* Please delete as appropriate.

II. To the Officer responsible for issuing transcripts: The applicant named above has applied for admission to a postgraduate curriculum at The University of Hong Kong. Please send a copy of the official transcript together with this form directly to:

Faculty of Architecture
The University of Hong Kong
Pokfulam Road
Hong Kong
(Ref.: MSc in Urban Planning)
THE UNIVERSITY OF HONG KONG

Master of Science in Urban Planning

ACADEMIC/PROFESSIONAL REFEREE’S REPORT* FOR ADB SCHOLARSHIP APPLICANTS

(Note to applicant: This referee report constitutes a very important part of the assessment. Please note that friends and relatives’ referee report will NOT be considered. The two referees given in the application form must consist of one academic and one professional referee*. Please complete Section 1 below and send a copy to your referee with the request that he/she completes Section 2 and returns it directly to Faculty of Architecture, The University of Hong Kong, Pokfulam Road, Hong Kong by 28 February 2017. Please indicate “MScUP Referee Report” on the envelope.)

(Note to referee: The applicant named below is applying for admission to the courses leading to the degree of Master of Science (Urban Planning). It would be very helpful to the University in assessing this application if you would kindly complete Section 2 of this report and return it directly to Faculty of Architecture, The University of Hong Kong, Pokfulam Road, Hong Kong by 28 February 2017. Please indicate “MScUP Referee Report” on the envelope. Under the provisions of the Personal Data (Privacy) Ordinance, applicants have the rights to request access to their personal data, including referee reports.)

SECTION 1

Name of applicant _____________________________
(in block letters, surname first)

SECTION 2

1. How long have you known the applicant and in what capacity?

__________________________________________

Your relationship with the applicant: academic/professional
(please circle as appropriate)

Number of years of acquaintance: ____________________________

Please complete either question 2 or 3 below as appropriate. If you are in a position to comment on both aspects, please complete both questions 2 and 3.

2. Your rating of the applicant’s academic ability:
(please tick the appropriate column)

<table>
<thead>
<tr>
<th>A (Excellent)</th>
<th>B (Good)</th>
<th>C (Adequate)</th>
<th>D (Marginal)</th>
<th>F (Poor)</th>
</tr>
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<td>Academic Performance</td>
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<tr>
<td>Analytical and Reasoning Capability</td>
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<td>Imagination and Innovation</td>
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<td>Maturity and Independence</td>
<td>________</td>
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</tr>
</tbody>
</table>

* A professional referee should be in a senior position who is able to comment on the applicant’s professional ability.
3. Your rating of the applicant’s professional ability (To be filled in by professional referee only): (please tick the appropriate column)

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| Administrative Work    |     |      |     |      |      |
| Analytical and Reasoning Capability |     |      |     |      |      |
| Initiative and Creativity |     |      |     |      |      |
| On-the-job Learning Ability |     |      |     |      |      |
| Promotion Potential    |     |      |     |      |      |

4. Please further comment on the applicant's strengths and weaknesses. Use an attached letter if desired.

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

5. In what ways might the applicant benefit from the programme for which he is applying?

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

6. How would you recommend the applicant? (Please tick as appropriate)

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<thead>
<tr>
<th></th>
<th>Recommend enthusiastically</th>
<th>Recommend with confidence</th>
<th>Recommend</th>
<th>Recommend with reservation</th>
<th>Do not recommend</th>
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Signature of referee ___________________________________________ Date ____________________________

Name and position ______________________________________________

Address _______________________________________________________

Please return this form to Faculty of Architecture, The University of Hong Kong, Pokfulam Road, Hong Kong, by 28 February 2017. Please indicate “MScUP Referee Report” on the envelope.
THE UNIVERSITY OF HONG KONG

Master of Science in Urban Planning

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(in block letters, surname first)

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Number of years of acquaintance: ____________________________________________

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(please tick the appropriate column)

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3. Your rating of the applicant’s professional ability (To be filled in by professional referee only): (please tick the appropriate column)

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4. Please further comment on the applicant's strengths and weaknesses. Use an attached letter if desired.

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5. In what ways might the applicant benefit from the programme for which he is applying?

________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________

6. How would you recommend the applicant? (Please tick as appropriate)

A  (Recommend enthusiastically) ☐
B  (Recommend with confidence) ☐
C  (Recommend) ☐
D  (Recommend with reservation) ☐
F  (Do not recommend) ☐

Signature of referee _______________________________________________ Date ______________________________

Name and position ________________________________________________

Address ________________________________________________________

______________________________________________________________

Please return this form to Faculty of Architecture, The University of Hong Kong, Pokfulam Road, Hong Kong, by 28 February 2017. Please indicate “MScUP Referee Report” on the envelope.
Please fill in the following correspondence address labels (applicant only):

<table>
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<tr>
<td>Address:</td>
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# INFORMATION SHEET

(to be sent to Institution you are applying to)

<table>
<thead>
<tr>
<th>Last Name:</th>
<th>First Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nationality: Date of Birth:</td>
<td>(dd/mm/yyyy)</td>
</tr>
<tr>
<td>Sex: Male</td>
<td>Female</td>
</tr>
</tbody>
</table>

**Home Address:**
- Street:
- City:
- State/Province:
- Home Country: Post Code:
- Home Phone:
- Mobile:
- Email:

**Current Address:**
- Street:
- City:
- State/Province:
- Current Country: Post Code:
- Phone:
- Mobile:
- Email:

**Office Address:**
- Street:
- City:
- State/Province:
- Business Country: Post Code:
- Office Phone: Fax No:
- Mobile:
- Office Email:

**Proposed Study Plan:**
- Degree:
- Field of Study:
- Expected Commencement Date: (dd/mm/yyyy)
- Are you applying to other Institutions? If so, which? Yes No
- Name of Institution:

**Academic Background** *(include course you are currently enrolled in, if applicable)*:
- Degree Obtained:
- Field of Study:
- Year Started: Year Completed:
- Name of Institution: Location:
- Language of Instruction Used:
- Honor(s) received:
Degree Obtained: 
Field of Study: 
Year Started: Year Completed: 
Name of Institution: Location: 
Language of Instruction Used: 
Honor(s) received: 

Have you been awarded an ADB-JSP Scholarship? ☐ Yes ☐ No

Degree: 
Field of Study: 
University: 
Awarded Period (Month & Year) From: To:

<table>
<thead>
<tr>
<th>English Proficiency</th>
<th>Reading</th>
<th>Writing</th>
<th>Speaking</th>
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<tbody>
<tr>
<td>Very Good</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Good</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>Fair</td>
<td>☐</td>
<td>☐</td>
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Professional History:

Present Employer:

Position: 
Company: 
Nature of Work: 
Industry: 
Products/Services: 
Sector: ☐ International Organization ☐ Private ☐ Public ☐ Non-profit
Date of Employment (Month & Year) From: To:
Annual Salary (in US$): 
Annual Family Income (in US$):

(Please attach your latest Certificate of Employment indicating Annual Salary/Monthly Salary with signature/stamp. For Annual Family Income, submit Certificate of Employment of both parents/spouse [if married]. For parents who are retired, deceased or unemployed, kindly submit Certificate issued by a local agency, company or government with signature/stamp whichever is applicable.)

Previous Employers: Begin with your most recent employment excluding present employer. Use separate sheet if the space provided is not sufficient.

Position: 
Company: 
Nature of Work: 
Date of Employment (Month & Year) From: To: 
Annual Salary (in US$): 

Position: 
Company: 
Nature of Work: 
Date of Employment (Month & Year) From: To: 
Annual Salary (in US$): 

Position: 
Company: 
Nature of Work: 
Date of Employment (Month & Year) From: To: 
Annual Salary (in US$): 

Position: 
Company: 
Nature of Work: 
Date of Employment (Month & Year) From: To: 
Annual Salary (in US$): 

Position: 
Company: 
Nature of Work: 
Date of Employment (Month & Year) From: To: 
Annual Salary (in US$): 

Position: 
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Nature of Work: 
Date of Employment (Month & Year) From: To: 
Annual Salary (in US$): 

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Date of Employment (Month & Year) From: To: 
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</table>

Total Work Experience: Year(s): & Month(s): Year(s) in Supervisory Level: (if applicable)

While the Scholarship will provide most of your financial requirements during the study period, what other additional resources do you have if you may need them?

Why do you want to undertake this particular area of study at this institution?

(Attach copies of academic records and mail this form to the institution where you wish to study. The institution will advise you whether or not your application qualifies for further screening.)
Applicant’s Income Information

Please fill in your/your family’s financial details and submit supporting documentary proof. Applicants who do not submit valid documentary proof will not be considered for the Asian Development Bank-Japan Scholarship Programme.

Applicant’s name: ____________________________________________
Applicant’s Annual Gross Income: ______________ (________currency unit) ......(1)
    Details if any:

Exchange Rate: 1 USD = ______________ (________currency unit) ..............(2)
Applicant’s Annual Gross Income in USD: __________________________(USD) ......(1) ÷(2)

----------------------------------------------------------------------------------------------------------------------------------

If the applicant is single,

Applicant’s father’s name: ____________________________________________
His Annual Gross Income: ______________ (________currency unit) ......(3)
    Details if any:

Applicant’s mother’s name: ____________________________________________
Her Annual Gross Income: ______________ (________currency unit) ......(4)
    Details if any:

Their Total Gross Income in USD: __________________________(USD) ...... ((3)+(4)) ÷(2)

----------------------------------------------------------------------------------------------------------------------------------

If the applicant is married,

Applicant’s spouse’s name: ____________________________________________
His/her Annual Gross Income: ______________ (________currency unit) ......(5)
    Details if any:

His/her Gross Income in USD: __________________________(USD) .....................(5) ÷(2)