



Master of Nursing (Clinical Leadership)

Application for Admission

❖ All fields must be completed in order for this application to proceed for assessment.

❖ Please print clearly in **BLOCK LETTERS**.

Have you applied to Western Sydney University before OR have you been a Western Sydney University student?

☐ Yes ☐ No

If yes, please state your Western Student ID number: _____

FOR OFFICE USE ONLY

Application No. _____

Western Student No. _____

SCE Student No. _____

I. Personal Particulars

*Please print as on HKID Card.

Surname*: _____ Other Names* _____

Chinese Name*: _____

Chinese Name in code*: _____

Date of Birth (dd/mm/yyyy) : _____ Gender : ☐ Male ☐ Female

HKID No. / Passport No. : _____ Country of Birth : _____

Country of Citizenship : _____

Telephone : _____
(Home) (Office) (Mobile)

Email Address : _____

Correspondence Address : Flat _____ Floor _____ Block _____

Name of Building, Estate, Street and District _____

☐ Hong Kong ☐ Kowloon ☐ New Territories

Equal Opportunities for Learning:

The School offers equal opportunities to all applicants with or without disabilities. To enable us to meet the needs of all students, you are encouraged to indicate in this form whether you require any special assistance for learning or examination. The School may approach you to obtain further details.

Special educational arrangement needed: ☐ Yes ☐ No

Please specify: _____

Affix a photo here
(for producing the
Student Card)

II. Academic Qualifications (in chronological order)

Copies of academic qualifications indicating grades and awards received MUST be submitted with this application. If qualifications are in a language other than English, please also supply certified translated copies. Your application cannot proceed for assessment without these documents. Please note, a collection of result slips and/or downloadable web transcripts will not be accepted.

Date		Name of School/ Institution	Programme	Full/Part Time
From	To			

III. Work Experience (in chronological order)

Some courses require details of your relevant employment history to support your application. If this information is required, please ensure you provide a letter from your previous employer on original company letterhead stating: your job title, the basis of employment, description of duties performed, duration of your employment, the full name, title and signature of the author of the letter.

Date		Organization	Position
From	To		

IV. Professional Qualifications (in chronological order)

Awarding Institution	Professional Qualifications	Means of Attaining**	Year Conferred

** X: By Exam, E: By Election, S: By Subscription

V. Academic Credit / Advanced Standing Application

Please download the Advanced Standing Application form at
http://www.westernsydney.edu.au/international/home/admissions/academic_credit_advanced_standing
You must include this form and documentation with your application.

Do you wish to apply for advanced standing from the following?

- | | | |
|---------------------------------|------------------------------|-----------------------------|
| ❖ Previous Postgraduate Studies | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ❖ Prior Learning Experience | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

VI. Declaration

School of Continuing Education, HKBU

Personal Data Collection Statement

- (1) Collection of personal data adheres to the Privacy Policy Statement / Personal information Collection Statement (PPS/PICS) of the Hong Kong Baptist University(the "University"). Please click [here](#) for access to the PPS/PICS.
 - (2) The personal information collected in this application form will be used by the School for:
 - a. processing a candidate's application and will become part of his/her student record upon successful admission to the programme;
 - b. sharing with appropriate parties and personnel of the University for administration, communication and other related purposes; and
 - c. the promotion of, including but not limited to, the School's courses and programmes, activities, awards, scholarships, bursaries, special offers, privileges, other services as well as fundraising appeals.
 - (3) Under the provision of the Personal Data (Privacy) Ordinance, applicants have rights to request for personal data access of correction. Request can be made in writing via email scereg@hkbu.edu.hk. The School may charge a fee to cover the administrative cost.
 - (4) For unsuccessful applications, all documents submitted together with the applications form will be destroyed.
- ☐ If you do not wish to receive any promotional information as stated in point (1c) of this statement, please tick the box.

Applicant's Declaration

- (1) The information given in support of this application is accurate and complete. I am aware that the School reserves the right to cancel the application at any time if the information given in this application is found untrue.
- (2) I understand that no switching of programmes is allowed once admitted.
- (3) I understand that the submitted application form and supporting documents are not returnable.
- (4) I have read the Admission Information for the programme I am applying for.
- (5) I have noted, understood and agreed to the contents of the Personal Data Collection Statement.

Western Sydney University

I wish to be considered for entry to the above course, and declare that all the information submitted on this application form is correct and complete. I authorize the Western Sydney University to obtain official records from any educational institution previously attended by me. I understand that the Western Sydney University reserves the right to vary any decision regarding admission or enrolment made on the basis of incorrect or incomplete information.

I have read and understood the above conditions and accept them fully.

Signature of Applicant

Date (dd/mm/yyyy)

Checklist for Application

- | | |
|--------------------------|---|
| <input type="checkbox"/> | 1. Have you provided your email address and phone number on this application? |
| <input type="checkbox"/> | 2. Have you attached a copy of your HKID card? |
| <input type="checkbox"/> | 3. Have you attached copies of ALL your required documentation? |
| <input type="checkbox"/> | 4. Have you attached English translations of ALL required documentation? |
| <input type="checkbox"/> | 5. Have you marked your name, contact number and programme name at the back of cheque / bank draft? |
| <input type="checkbox"/> | 6. Have you signed the declaration? |

VII. Survey

Please provide the following information for statistical purpose of the School.

How did you learn about this programme? (You can choose more than one option)

- | | |
|--|---|
| <input type="checkbox"/> Booklet/ Leaflet | <input type="checkbox"/> Prospectus |
| <input type="checkbox"/> Newspaper (Please specific _____) | <input type="checkbox"/> Online Advertisement |
| <input type="checkbox"/> Smartphone Advertisement | <input type="checkbox"/> SCE Website |
| <input type="checkbox"/> Friends | <input type="checkbox"/> Others (Please specific _____) |