Application for Admission to the Doctor of Nursing

NOTES ON SUBMISSION OF SUPPORTING DOCUMENTS

Enclosed (please tick as appropriate)

Please upload the following documents before the respective application deadlines and within four weeks from the date of the creation of your account; AND post the certified true copies of your documents to the School of Nursing (5/F, Academic Building, 3 Sassoon Road, Pokfulam). Your application number and Programme (i.e. "Doctor of Nursing") 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.

Certified true copies of academic transcripts#

(please send the Transcript Request Form along with your transcript application form to the institute from which the transcript is requested, if applicable)
Certified true copies of HKID
Certified true copies of Certificate of Registration and valid practising certificate
Statement of proposed research area
Two academic or employment reference reports (to be sent directly by the referees or in a sealed envelope signed by the referee)
Official score report of TOEFL, IELTS, GCE, IGCSE or CPE* (for applicants from institutions outside Hong Kong where the language of instruction and examination is not entirely in English)
Other documents which you would like to bring the attention of the University (e.g. list of publications, documentary evidence of academic awards received

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.

and professional qualifications, and summary or relevant experience)

The University will **NOT** accept any examinee's score record sheet. Please arrange with the examining organization/institution to send us an official score report.

Documents once submitted will not be returned.

Doctor of Nursing

Transcript Request Form

 To the Ap 	oplicant:
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	ach his/her original official transcri it to the appropriate officer of institu	
Name of Applicant:	in English	() in Chinese, if any
University/College		
Dates of Attendance:	From	То
Title of	Date of	of Award:
Programme applied for ac	dmission at The University of Hong	Kong:
Doctor of Nursing (DNursing * Please delete as approp		

II. To the Officer responsible for issuing transcripts:

The applicant named above has applied for admission to a taught postgraduate programme at The University of Hong Kong. Please send <u>one</u> copy of the <u>official</u> transcript together with this form directly to:

DNurs Programme Office School of Nursing The University of Hong Kong 5/F, Academic Building 3 Sassoon Road Pokfulam, Hong Kong

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Academic Referee's Report

Note to applicant:

Applicants should complete Section I below, then send one copy of this form to each of two referees with the request that the referee should complete Section II and return the form directly to DNurs Programme Office, School of Nursing, The University of Hong Kong, 5/F, Academic Building, 3 Sassoon Road, Pokfulam, Hong Kong before the application deadline either by post, or email at dnurs@hku.hk. Alternatively, the referee may return the completed report to applicant in a signed and sealed envelope, and the applicant can send the unopened envelope together with the application documents.

Note to referee:

The applicant named below is applying for admission to the degree programme indicated. Please complete Section II of this report and return it directly to DNurs Programme Office, School of Nursing, The University of Hong Kong, 5/F, Academic Building, 3 Sassoon Road, Pokfulam, Hong Kong before the application deadline either by post, or email at dnurs@hku.hk. Alternatively, you may return the completed report to the applicant in a signed and sealed envelope. All information given here will be treated as strictly confidential. It will be used only for the purpose of determining whether the candidate will be admitted; and it will be accessible only to those responsible for processing the application. The reference will be destroyed after that decision has been made. The University will be most grateful for your full and candid assessment.

Section I (to be	completed by the a	pplicant)					
Name of applicant	(surname): (given name):						
Programme appl	ied for: Doo	ctor of Nursi	ng (Full-tim	ne/Part-time)*			
* Please delete as	s appropriate.						
Section II (to be	completed by the r	referee)					
1. How long ha	ave you known the	applicant?					
In what capa	acity have you know	wn the applica	ant?				
	you rate the applica as appropriate)	ant's ability to	carry out g	raduate work a	at the level ap _l	olied for?	
		Excellent	Good	Adequate	Less than adequate	No basis for judgement	
Powers of analys	is and reasoning						
Imagination and	originality						
Motivation							
Breadth of knowle	edge						
Skills of writing and argumentation							
Capacity for inde	pendent work						

itellectual ability overa	ıll																						
Compared with of achievement? (Please tick as a				you	have	e ta	ught	t, ho	w w	oul/	d y	ou i	rate	the	e a _l	oplic	can	ťs i	inte	llec	tual	ļ	
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Please return this form to DNurs Programme Office, School of Nursing, The University of Hong Kong, 5/F, Academic Building, 3 Sassoon Road, Pokfulam, Hong Kong as soon as possible.

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Statement of Proposed Research Area

	bosed Research Area in single-spaces should be about 4 pages. Imme Office by email (dnurs@hku.hk).
Applicant Name:	
Proposed Topic / Title of	
Research:	