香港城市大學
City University of Hong Kong

Application Number (for office use)
申请编号（供办公室使用）

Personal Particulars for Admission to the Joint PhD Programme Offered by CityUHK

香港城市大学联合培养博士研究生项目申请人个人资料表格

Notes: (1) This application form is for students applying for admission to the above collaboration scheme.
此表格适用于学生申请上述联合培养项目。
(2) Please complete this application form clearly and accurately in BLOCK letters using a black ballpoint pen.
请用黑色圆珠笔以英文大写字母清晰准确填写。
(3) After completion of your application form, please pass this form to the supervisor of your home university for approval arrangement. *请向原属院校导师提交填写好的表格及申请材料。*
(4) *Application Deadline: 04 December 2026. 申请截止日期: 2026 年 12 月 04 日。*

A. Personal Particulars 个人信息

English Name 英文名:

Surname 姓:

Given Name 名:

Chinese Name 中文名:

Gender 性别:

'M' – Male 男
'F' – Female 女

Date of Birth 出生日期: Day 日 / Month 月 / Year 年

Home Province 户籍省份:

China ID No 中国身份证号码:

Home University 原属院校:

Contact Phone No 联系电话: Country Code 国家代码 8 6 - Area Code 区号 - Telephone No 电话号码.

Email Address 电邮地址:

B. Proposed Research Study and Other Application Details 拟申请之研究项目及其它申请详情

(Please tick (√) the appropriate box)(请在合适的选项打(√))

Major Discipline 一级学科:

CityUHK Department that you apply for 申请的城大院系名称:

Your PhD supervisor at home university 原属院校博士生导师:

Have you applied for a CityUHK MPhil/PhD programme before 是否曾申请过城大的哲学硕士/ 博士课程? No 否 Yes 是

If yes, please provide your application no. 如果是，请提供申请编号:

And in which Department/School 及请提供院系名称:

Name of CityUHK academic staff member contacted, if any 曾联系过的城大学术人员姓名（如有）:

C. Declaration 声明

1. I declare that the information given in support of this application is, to the best of my knowledge, accurate and complete. I understand that the information will be used in the admission decision process and that any misrepresentation will disqualify my application. 本人声明，表格中所提供的资料在我的理解范围内是准确无误和完整的。这些资料将在录用决定过程中使用，任何虚报将导致本人失去申请资格。
2. I authorize the City University of Hong Kong to use the data in this application form as a basis for consideration of admission and for various types of processing in relation to my application, including checking on multiple applications and on records of my academic/professional qualifications with the parties concerned. 本人授权予香港城市大学使用表格中的资料作为取录考虑的参考及与申请有关的各项事宜，包括调查有否递交多于一份申请及与有关方面核查学术和专业资历。
3. I understand that, upon my registration, the data will become part of my student record and may be used for all relevant purposes in accordance with the administrative procedures of the University.本人明白，在城大注册后，这些资料将成为本人学生记录的一部分，可用于依照大学行政管理程序操作的所有相关用途。
4. I agree to substantiate my qualifications claimed in this application form by producing original certificates and transcripts when required. 本人同意在需要的情况下提供学历和成绩单原件，用以证实申请表格中声明的资历。

Documents to be submitted together with the application form 需与申请表一并提交的文件:

(a) Joint Research Statement for Joint PhD Programme of Mainland Collaboration Scheme 联合培养博士研究生同意书
(b) Recommendation on Admission to the Joint PhD Programme Offered by CityUHK 联合培养博士研究生推荐书
(c) CV in English of the Research Supervisor at Partner University (which should include title and position, educational and professional qualification, publications and any other relevant information) 内地合作院校导师英文版个人简历

Signature 签名: _____ Date 日期: _____

(202610)