

香港中文大学(深圳)
THE CHINESE UNIVERSITY OF HONG KONG, SHENZHEN
教务处
Registry Office
减少课业负荷申请表
Application Form for Reducing Course Load

注意
Note:
请留意本科生总学则 5.1, 5.3, 5.4 及 5.5 条规定, 并将申请表交至主修课程/学院审批。
Please note clause 5.1, 5.3, 5.4 and 5.5 of the General Regulations Governing Undergraduate Studies and submit the application form to the Major Programme/ School for approval.

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姓名 (英文) \_\_\_\_\_ (中文) \_\_\_\_\_  
Name: ( in English ) \_\_\_\_\_ ( in Chinese ) \_\_\_\_\_

学院 \_\_\_\_\_ 主修课程 \_\_\_\_\_ 学号 \_\_\_\_\_  
School: \_\_\_\_\_ Major Programme: \_\_\_\_\_ Student I.D. No: \_\_\_\_\_

修业年 \_\_\_\_\_ 预期毕业年份/学期 \_\_\_\_\_ 联络电话 \_\_\_\_\_  
Year of Attendance: \_\_\_\_\_ Expected Year/Term of Graduation: \_\_\_\_\_ Contact Tel. No.: \_\_\_\_\_

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请在适当位置打√ (Please tick as appropriate)

本人拟申请于 _____ 学年 _____ 学期减少 **学期** 课业负荷至 _____ 学分。
 I wish to apply for reducing **term** course load for _____ term of academic year _____ to _____ units.

请注明申请原因及附上相关证明以供主修课程/学院参考:
Please specify reason(s) and attach supplementary documents for the reference of your Major Programme/ School:

是否曾获批准减少学期修课学分? 如有, 请注明。 Have you been approved to reduce term course load in previous academic term? If yes, please specify. <input type="checkbox"/> 没有 No <input type="checkbox"/> 有 Yes _____
原因 Reason(s):

签字 _____ 日期 _____
Signature: _____ Date: _____

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**收集个人资料声明**

- 此表格所收集的资料将用以处理有关的申请, 所提供的资料于无需保留时将全部销毁。
- 本表格所收集的资料或会转交香港中文大学(深圳)其他行政或教学部门作考虑或批核用。
- 如在递交此表格后要查阅或改正个人资料, 请联络教务处: (电话: (86)755-84273626 传真: (86)755-84273691 电邮: registry@cuhk.edu.cn)

**Personal Information Collection Statement:**

- The personal data provided on this form will be used by the Registry Office for the purpose of processing this application. All information provided, when no longer required, will be destroyed.
  - Information provided on this form may be transferred to other departments/administrative units within CUHK(SZ) for consideration and granting approval, where applicable.
  - For correction of or access to the personal data after submission of this form, please contact the Registry Office:  
(Tel. No.: (86)755-84273626, Fax No.: (86)755-84273691, e-mail address: registry@cuhk.edu.cn)
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| <b>Major Programme/ School</b><br>I *endorse / do not endorse the student's application.<br><br><br><br><br><br><br><br><br><br>Signature of Dean/ Programme Coordinator _____ Date _____<br>(Printed Name: _____ ) | <b>Director of Registry Services</b><br>I *approve / do not approve the student's application.<br><br><br><br><br><br><br><br><br><br>Signature of Director of Registry Services _____ Date _____<br>(Printed Name: _____ ) |
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\*please delete as appropriate