

**NON-LOCAL HIGHER AND PROFESSIONAL
EDUCATION (REGULATION) ORDINANCE (CAP.493)**

**FORM 2 - INFORMATION REQUIRED FOR EXEMPTION
OF A COURSE FROM REGISTRATION**

Please complete **one** form for each course.

It is important that you read the ‘**Guide for Exemption of a Course from Registration**’ obtainable from the Non-local Courses Registry of the Education Bureau (EDB) before you make a submission.

This form should be completed in accordance with the directions specified in the form and the Guidance Notes. Incomplete information may cause delay in processing your submission.

The form together with its specified attachments should be submitted to:

The Registrar
Non-local Courses Registry
Education Bureau
Room 603, 6/F
14 Taikoo Wan Road
Taikoo Shing
Hong Kong

PERSONAL INFORMATION COLLECTION STATEMENT

Purpose of Collection

1. The personal data provided by you in this form will be used by the EDB for one or more of the following purposes:

(a) Activities relating to the processing, authentication and counter-checking of the application for exemption from registration of non-local courses;

(b) Activities relating to matching of the personal data with the database of other relevant Government bureaux / departments in connection with the processing, authentication and counter-checking of the application mentioned in (a) above;

(c) Activities relating to matching of the personal data within the database of the EDB for purposes of verifying / updating records of the EDB;

(d) Activities relating to training and development including invitation of participation in programmes/activities, applications for reimbursement of course fees, assessment of nominations, awards and scholarship, and monitoring of attainment progress;

- (e) Activities relating to the processing and vetting of applications for, and disbursement of, funding / grants / subsidies, and conducting of audits;
- (f) Activities relating to compilation of statistics, research and Government publications; and
- (g) Activities relating to the administration and enforcement of rules and regulations including the Education Ordinance (Cap. 279), its subsidiary legislation (such as the Education Regulations and the Grant/Subsidized Schools Provident Fund Rules) and the Codes of Aid.

2. The provision of personal data required by this form and during the processing of this form is obligatory. In the event that you do not provide those personal data, we may not be able to handle or further process the application.

Classes of Transferees

3. The personal data you provide will be made available to persons working in the EDB. Apart from this, they may be transferred or disclosed to the parties or in the circumstances listed below:-

- (a) other Government bureaux and departments for the purposes mentioned in paragraph 1 above;
- (b) the school in which the form relates for the purposes mentioned in paragraph 1 above;
- (c) personnel, agent, service provider or organisations, including the Hong Kong Council for Accreditation of Academic and Vocational Qualifications, engaged by the EDB to provide services or advice for purposes mentioned in paragraph 1 above;
- (d) where you have given your prescribed consent to such disclosure; and
- (e) where such disclosure is authorised or required under the law or court order applicable to Hong Kong.

Access to Personal Data

4. You have the right to request access to and correction of your personal data held by the EDB. Request for access to or correction of personal data should be made in writing to Executive Officer (Non-local Courses Registry)1 at Room 603, 6/F, 14 Taikoo Wan Road, Taikoo Shing, Hong Kong or email to exoncr1@edb.gov.hk.

Course Name: _____ _____	(For Office Use Only) Ref. No.: _____ Date of Receipt: _____
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SECTION A

PARTICULARS OF OPERATOR (see Guidance Note A)

1. Name of operator in English _____
2. Name of operator in Chinese (if applicable) _____
3. The operator is
 - an academic institution
 - a partnership / consortium
 - a corporation
 - an individual
 - other (please specify) _____
4. Address _____

5. Correspondence address _____

6. Telephone No. _____ 7. Fax No. _____
8. E-mail address _____

SECTION B

INFORMATION ABOUT THE NON-LOCAL INSTITUTION / NON-LOCAL PROFESSIONAL BODY AWARDING THE QUALIFICATION TO WHICH THE COURSE LEADS (see Guidance Note B)

1. Name of non-local institution / non-local professional body

2. Year of establishment _____
3. Main address in home country _____

4. Telephone No. _____ 5. Fax No. _____
6. E-mail address _____

7. Type of institution
- Publicly-funded
 - Private
 - Other (please specify) _____
8. Status of institution
- Degree awarding
 - Other (please specify) _____
9. Nature of the professional body (if applicable) _____
- _____
- _____
- _____

SECTION C

INFORMATION ABOUT THE LOCAL INSTITUTION OF HIGHER EDUCATION

(see Guidance Note C)

1. Name of the institution _____
2. Address _____
3. Telephone No. _____ 4. Fax No. _____
5. E-mail address _____
6. Contact person
- a. Name _____
 - b. Department _____
 - c. Post _____
 - d. Telephone No. _____ e. Fax No. _____
 - f. E-mail address _____
7. Please provide a certificate issued by the executive head of the local institution certifying that the course has fulfilled the conditions set out in Section 8(1)(a)(i),(ii) and (iii) of the Ordinance. (**Attachment 1**)

SECTION D

INFORMATION ABOUT THE COURSE CONDUCTED / TO BE CONDUCTED IN HONG KONG (see Guidance Note D)

1. Name of course _____

2. Title of award the course leads to _____

3. Date / Proposed date of first delivery of the course in Hong Kong _____

4. Mode of delivery

face-to-face

distance learning with face-to-face tuition

distance learning without face-to-face tuition

other (please specify) _____

5. Length of course (in months)

a. Average length _____

b. Minimum length _____

c. Maximum allowable length _____

6. Minimum entry requirements

7. Course Curriculum

Please provide an outline of the course curriculum (**Attachment 2**), making clear the following:

a. Aims and objectives of the course

b. Course structure

c. Details of any course/course components that have been introduced to ensure local relevance

8. Course assessment

Please indicate how the course is assessed by using one or more of the boxes below making clear the relevant weightings in percentages -

- Written examination
- Continuous assessment
- Thesis/Dissertation/Project
- Other [please specify]

Year/ Module 1	Year/ Module 2	Year/ Module 3	Year/ Module 4
%	%	%	%
%	%	%	%
%	%	%	%
%	%	%	%

9. Teaching and learning activities associated with the course in Hong Kong

Teaching / learning activities		No. of hours in Hong Kong	No. of hours outside Hong Kong	Total no. of staff involved
Lectures	compulsory			
	optional			
Tutorials/ Seminars	compulsory			
	optional			
Group discussion sessions	compulsory			
	optional			
Self-study/Distance learning				
Others [Please specify]				

10. Teaching Staff

Please give names, qualifications and present full-time occupation of local and non-local staff appointed to assist with teaching / learning activities in Hong Kong.

(Attachment 3)

11. Student numbers in Hong Kong

- a. Total number of students registered in Hong Kong (if applicable) _____
- b. Maximum number per intake _____
- c. Minimum number per intake _____
- d. Average number per intake (if applicable) _____
- e. Number of most recent intake (if applicable) _____
- f. Date of the most recent intake (if applicable) _____
- g. Frequency of intakes in Hong Kong _____

12. Student facilities and support services provided in Hong Kong

- Learning materials
- Access to library
- Access to information technology facilities
- Access to academic / pastoral tutors
- Language support
- Study skills
- Other (please specify) _____

Please give brief description of the student facilities / support services provided (**Attachment 4**).

13. Fees and charges

- a. Total course fee for the complete course _____
- b. Number of instalments _____
- c. Amount of each instalment and normal time for payment

- d. Where course fee is not inclusive, please give details of further fees payable by students -

	<u>Amount</u>	<u>Time for payment</u>
<input type="checkbox"/> On application	_____	_____
<input type="checkbox"/> For registration	_____	_____
<input type="checkbox"/> For course materials	_____	_____
<input type="checkbox"/> For examination	_____	_____
<input type="checkbox"/> Other (please specify)	_____	_____
TOTAL	_____	

e. Are there procedures in place to allow for refund of fees where appropriate?

Yes No

If yes, please provide details and if no, please give reasons. (**Attachment 5**)

14. Please provide details (**Attachment 6**) of any quality assurance system or procedure in place to ensure that the administration and delivery of the course in Hong Kong is up to the standard as required / recognised by the non-local institution / professional body.

SECTION E

DECLARATION BY OPERATOR OF THE COURSE (*See Guidance Note E*)

I declare that all the above information regarding the course, namely

is to the best of my knowledge, true and accurate.

Signature _____

Name in block letters _____

Capacity in which signed Vice-Chancellor / President / Principal /

 Chairman / Chief Executive *

Date _____

* Please delete as appropriate

- END -