

**THE UNIVERSITY OF HONG KONG
LI KA SHING FACULTY OF MEDICINE**

Recommendation Form for RPg Student Exchange

[Please submit the completed form to Ms Amy Leung of the Faculty Office via the home/receiving department at HKU at least 3 months prior to the commencement of the exchange.]

Incoming/Outgoing* Student (**please delete where appropriate*)

HKU Supervisor

Primary supervisor:	
Co-supervisor(s):	

Exchange Student (Incoming students are also required to submit a hard copy of the form, "Application for Admission as Visiting Student"

<http://www.med.hku.hk/download/bulkmail/6828181213183418.pdf>

Name:	
Programme of study:	
Registration date:	
Field of study:	
Department/ Institution (for incoming student only):	

Collaborator (*please attach his/her CV*)

Name:	
Position:	
Institution:	
Research interests:	
Current Collaboration <i>(please provide information about the current collaboration or joint publication, if any)[#]</i>	
Other allowance provided by the collaborator or other parties:	<input type="checkbox"/> Yes Currency: _____ Amount: _____ /month/in total* Provided by _____ <input type="checkbox"/> No

Proposed Exchange Study

Duration:		
Date:	from:	to:
Field of collaborative research project:		
Objectives and expected outcomes of the research exchange [#]		
Expertise, reagents/instrumentations that can be provided by the collaborator and not available in your home institution [#] :		
<i>Please provide a detailed research plan during the exchange period and the relevance to your current research project)</i> [#]		

[#] Please use additional sheets if necessary

URC Travel Support (**Please delete as appropriate*)

◆ Funding support from URC Travel Support *will / will not** be sought.

Signature

Primary Supervisor:		Collaborator:	
Name:		Name:	
Department:		Institution:	
Date:		Date:	

Co-supervisor:		Co-supervisor:	
Name:		Name:	
Department:		Department:	
Date:		Date:	

DRPC Chairperson:		Candidate:	
Name:		Name:	
Date:		Date:	

December 2018