



Grant Application for Overseas Students

We are determined that no qualified members should be deprived of any opportunities due to financial hardship. Please note that the grant will only cover the tuition fee.

Applications will only move forward with students who meet all of the eligibility criteria.

Eligibility Requirements:

- 1. Top 2% of your school or Students with sports achievements
- 2. Endorsement from school that you will need financial support
- 3. Students receiving grant from local government-aided programme (with supporting documents)

A) Information to be completed by the student applicant:

Last Name	
First Name	
Academy Membership No:	
(if any, starts with AA or AL)	
Application Number No	
(if any) T2022xxx	
Level of Study	
Estimated year of entering the University	
le. Sept 2024	
Contact No.	
Student email	
Student address	
Address 1	
Address 2	
City/State	
Country	
Zip Code	
Languages(s) spoken at home	
School name	





School type (Please choose one)		PublicPrivateOther	
Monthly income of y (USD)	our family and currency		
What is your parents marital status?	' (Guardians') current	Married Wide Other (Explain):	owed Separated/Divorced
Parent's Information:	Father		Mother
1-Name	1-		1-
2-Occupation/title	2-		2-
3-Employer	3-		3-
4-Number of years with employer	4-		4-
5-Monthly Income (USD)	5-		5-
Applied programme((Please indicate prog			
Interested programm University of Hong Ko	-		





1. As part of the application process, we would like to learn more about your interest in the HKU Academy for
the Talented as well as your dreams and aspirations. What are you hoping to get out of participating in the
Academy over the next 3 years? (500 character limit)
2. How can you contribute to the scheme if you are admitted with the grant?
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3. Please list out if you or your family is currently supported by any local government-a supporting documents if any).	ided programmes (with
4. I agree to write a testimonial at the end of the programme	YES / NO
Please send it to talented@hku.hk before Sept 1	
5. I certify that all information is accurate to the best of my knowledge	YES / NO





B) Information to be completed and endorsed by the school:

School Name		
School Address		
Name of responsible teacher		
Title of responsible teacher		
Whatsapp contact number (Teacher)		
Email Address (Teacher)		
Principal Name		
Principal Email Address		
Email Address		
I approve of the providing of financial		
support to the student	Yes	No
Tuition Fee that the student is currently	USD \$	
Tuition Fee that the student is currently paying per month (USD)	USD \$	
paying per month (USD)	USD \$	
	USD \$	
paying per month (USD)	USD \$	
paying per month (USD)	USD \$	
paying per month (USD)	USD \$	
paying per month (USD)	USD \$	
paying per month (USD) School chop	USD \$	
paying per month (USD)	USD \$	
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paying per month (USD) School chop	USD \$	
paying per month (USD) School chop Principal's Signature	USD \$	
paying per month (USD) School chop	USD \$	