



The Hong Kong Academy of Nursing
香港護理專科學院

APPLICATION FOR SPONSORSHIP

(_____ Name of the Activity _____)

Personal Particulars

Please type or complete the form in **BLOCK LETTERS** and *circle as appropriate

Title: * Ms /Mr /Mrs /Dr/Prof.	Surname:	Given Name:
Name in Chinese:	Sex * F / M	
Workplace Organization:	Specialty:	
Workplace Position	Mobile no.:	
Ordinary Member / Fellow title:		
Year of award :	Ordinary Member	Fellow:
*Membership / Fellowship No.:		
Abstract accepted	Oral / Poster presentation	
	Title:	
Please indicate if you have any activities involvement and/or contribution to the College /HKAN	:	

SUPPORTIVE DOCUMENTS

1. Conference attendance certificate (to be submitted after Conference)
2. Abstract (attached as appropriate)

I declare that :

- This is the sole sponsorship I received for attending this activity and I received no Sponsorship from other organizations or employers regarding to this conference/symposium and abstract submission.
- I have received sponsorship from HKAN in the Year _____
- I have not received any sponsorship from HKAN before

Signature of Applicant

Date

Endorsed by The President of The College
Hong Kong College of _____

Date

The right to grant the sponsorship would be reserved by the Council of HKAN.



The Hong Kong Academy of Nursing

香港護理專科學院

Note : Guideline for the Use of Personal Data

The Hong Kong Academy of Nursing (HKAN) undertakes to comply with the requirements of the Personal Data (Privacy) Ordinance to ensure that personal data kept are accurate and securely kept. To ensure you are well informed of the personal data as collected, please read through this guideline.

Purpose of collection and guideline for use of personal data

1. HKAN will use personal data collected from a data subject for the purposes for which it is collected.
2. Provision of personal data to HKAN is on voluntary basis. However, if you do not provide sufficient personal data, we may not be able to process your application or provide service to you.
3. HKAN may use your personal data in future (name, email address, mailing address) for the purposes of providing you with the information of HKAN, handling application, issuing receipt, research, fundraising appeal, collecting feedbacks, as well as activities invitation and related promotion purposes.

Access to and updating personal data, request for cessation of using personal data for promotion purposes

Apart from the exemptions provided under the Personal Data (Privacy) Ordinance, you are entitled to

- Access and update your personal data held by HKAN,
- Request to cease to use your personal data for promotional purposes.

If you object HKAN to use your personal data for the purposes as stated above, please contact us in written with your full name, email address as well as dated by mail/ email. NO charge will be applied.

For Office Use:

Applicant no. : ()

Merits:

() years of fellow () council member of College () council member of HKAN
 () co-opted member of College () poster/oral presentation

Type of activity: Conference / Symposium / Forum /others _____

Guideline for Award of Sponsorship

1. The sponsorship will be awarded to the designated number of applicants with the highest merits accordingly :

1.1 One point is awarded for each fellow year. _____ Years

1.2 Three points are awarded for poster/oral presentation in the conference. Yes / No

1.3 Additional 5 points for being a council member of HKAN. Yes / No

OR, Additional 3 points for being served in the council of the college.

1.4 _____ points are awarded for the activities involvement/contribution to Council of the College/HKAN Yes / No

Total Scores:

Score
--

2. The application needs to be endorsed by the President of the College before submission.

3. Priority will be given to the first-time applicant who did not apply for HKAN sponsorship.

Approve Yes No

By _____
Name:

_____ Name: