



相片
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2009 年至 2010 年度課程報名表 Enrolment Form for Admission

同時註冊美國自然醫學大學課程 Also register for University of Natural Medicine Program
請以正楷填寫此表格 (Please complete this form in BLOCK LETTERS)

申請編號/Application No. _____

甲部 Part A : 個人資料 Personal Particulars

01 中文姓名: Name in Chinese (姓氏 Surname) (名字 Given Name)
02 英文姓名: Name in English (姓氏 Surname) (名字 Given Name)
03 稱謂: Title (先生 Mr., 小姐 Miss, 太太 Mrs., 女士 Ms.)
04 性別: Sex (男 Male, 女 Female)
05 香港身份證/護照號碼: HKID Card/ Passport No.
06 簽發國家(如有): Issuing Country (If any)
07 出生日期: Date of Birth (dd/mm/yy)
08 年齡: Age
09 職業: Occupation
10 工作機構: Name of Employer
11 手提/傳呼: Mobile / Pager
12 住宅電話: Home Tel.
13 辦事處電話: Office Tel.
14 傳真: Fax
15 電子郵箱地址: E-mail Address
16 通訊地址: Correspondent Address
17 緊急聯絡人: Emergency Contact Person
18 緊急聯絡電話: Emergency Contact Tel.
19 最高教育程度: Highest Education Level (中五 Form 5, 中七 Form 7, 專上 Post-Secondary, 大學 University, 研究院或以上 Postgraduate or above, 其他 Others)

乙部 Part B : 20 如何得悉本院課程? (可作多項選擇)

How did you learn about these programs? (You may tick more than one option.)

- (a) 廣告 Ad
(b) 學院網頁 AINM Website
(c) 電台/電視 Radio/TV Program
(d) 學院課程手冊 Institute Prospectus
(e) 核準招生中心 Authorized Centre
(f) 個別課程資料 Course Pamphlets
(g) 講師介紹 Referred by Lecturer
(h) 電子郵件 Email
(i) 親友推介 From friend/relatives
(j) 互聯網 Internet
(k) 講座 Seminar
(l) 其他(請註明)Others(please specific)

Table for official use only with columns: Admitted, Rejected, Waiting List. Rows for Application Fee, Administration Fee, and Tuition Fee, each with payment options like cheque, credit card, and cash.

本院填寫: 甲部資料 (已填妥/未填妥), 乙部資料 (已填妥/未填妥)
職員第一次核對簽署: _____ 職員第二次核對簽署: _____

丙部、Part C：學歷、工作經驗及技能 Qualifications, Work Experiences and Skills**(1) 21 學歷及專業資格(請順序列出) Academic and Professional Qualifications (in chronological order)**

由 月 / 年 From MM / YYYY	至 月 / 年 To MM / YYYY	頒授機構 Issuing Authority	學歷 / 專業資格 Academic / Professional Qualifications	頒發日期 Issue Date

請附上有關學歷及專業資格之證明副本(如適用)。Please attach copy of Academic and Professional Qualifications (if applicable).

自然醫學醫師課程申請人需向畢業的大專院校申請正式學業成績表，由該大專院校直接寄送到本學院。ND study applicant should apply for an Official Transcript from his/ her undergraduate school, and has the Official Transcript sent directly by the undergraduate school to AINM.

(2) 22 工作經驗(請順序列出) Work Experience (in chronological order)

除特別註明外，申請人只需提供與所報讀之課程有關的資料，及其需求之補充資料。Unless otherwise specified, applicants should only provide details and copies of supplementary information to the relevant program applied. 如此部份空位不敷填寫，申請人可使用表格 [HKFA0103](#) 詳列有關資料。If there is insufficient space, please use separate form [HKFA0103](#).

由 月 / 年 From MM / YYYY	至 月 / 年 To MM / YYYY	公司名稱及地址(如屬兼職，請予註明) Company Name & Address (If part-time, please specify)	職位 Position Held	職責簡述 Job Duties

請附上有關工作經驗/推薦之證明副本(如適用)。Please provide copies of work experiences and recommendation documentary proof (If applicable).

(3) 23 語言能力 Language Skills

	頒授機構 Issuing Authority	成績/程度 Grades / Level	頒發日期 Issue Date
英文 English			
中文 Chinese			
普通話 Putonghua			

請附上語言能力測試之成績 / 有關證書副本 (如適用) Please provide copies of language proficiency test result / relevant certificates (if applicable).

(4) 24 電腦知識及其它技能 Computer Knowledge and Other Skills**(5) 25 申請科目豁免(本院保留最終決定權) Subject Exemptions (Subject to the final approval of the School)**

是 Yes (詳情請與職員聯絡 Please contact the staff)

否 No

(6) 26 申請學分認可 (本院保留最終決定權) Advanced Standing (Subject to the final approval of the School)

是 Yes (詳情請與職員聯絡 Please contact the staff)

否 No

(7) 27 其他資料 Additional Information

你可提供其他相關資料 You may provide other information which is relevant to your application.

如此部份空位不敷填寫，申請人可另紙詳列有關資料。If there is insufficient space, please give details on a separate sheet.

(8) 28 機密推薦書 Confidential Recommendation Letter (請使用表格 Please use form [HKFA0104](#)) (自然醫學醫師課程適用 For ND study only)**(9) 29 自我介紹書 Self Introduction Letter (請使用表格 Please use form [HKFA0105](#)) (自然醫學醫師課程適用 For ND study only)**

由本院填寫：丙部資料 已填妥 未填妥 (請註明：_____)

職員第一次核對簽署：_____ 職員第二次核對簽署：_____

丁部、Part D 繳費方法 Methods of Payment

30 現金繳付 Cash 31 支票/銀行本票號碼 Cheque/Bank Draft No. #1 _____

32 信用卡 Credit Card: Visa Master
33 全數繳付 Full Payment 6 個月分期付款 6-month installment 10 個月分期付款 10-month installment

34 信用卡號碼 Card No. #2 35 有效日期: (月/年) Expiry Date (mm/yy): _____

Grid for card number and expiry date: | | | | | --- | | | | | --- | | | | | --- | | | | |

36 發卡銀行 Card Issuing Bank: _____ 37 持卡人姓名 Card Holder's Name: _____

本人授權美國自然醫學學院於上述信用卡收取如下費用 I hereby authorize AINM to charge the credit card above for :

38 報名費 Application Fee HK\$ _____ 39 行政費 Administration Fee HK\$ _____

40 學費 Tuition Fee HK\$ _____

41 持卡人簽署 Card Holder's Signature: _____ 42 日期 Date : _____

#1 附註: 支票抬頭請寫上 Notes: Please make a crossed cheque payable to "Urban Fitness Centre For Integrative Health & Wellness Management" or/或 "UFCFIH&WMGT"

#2 如使用信用卡繳付報名費及學費, 信用卡的賬單將會出現"UFCFIH&WMGT"字眼。
If credit card is used to pay for enrolment and course fees, "UFCFIH&WMGT" will appear in credit card slip.

戊部、Part E 43 聲明 Declaration

1. 學院聲明 Institute Declaration

(1.1) 本申請表內提供的個人資料將僅供本學院職員用作處理申請報讀有關課程之用。
Personal data provided in this Enrolment Form will be used by AINM staff only for the purpose of consideration for admission to the concerned program.

(1.2) 當甄選入學過程完結:
When the processes for consideration of admission have been completed:

(a) 如入學申請不被接納, 本院將銷毀一切有關的個人資料。
Personal data provided in the Enrolment Forms of unsuccessful candidates will be destroyed.

(b) 成功申請者的個人資料將會存入學生檔案, 並只由本學院職員處理。
Personal data provided in the Enrolment Forms of successful candidates will become part of the student record, and will be handled by AINM staff only.

2. 申請人聲明 Applicant's Agreement and Declaration

(2.1) 本人謹此聲明在本申請表填報的資料均屬正確及完備, 並授權美國自然醫學學院索取本人之考試及就讀資料。
I declare that the information provided in this form is true and complete. I authorize American Institute of Natural Medicine to obtain further information about me from concerned institutions.

(2.2) 本人明白若提供任何虛假或誤導性資料, 本人的申請資格將被取消。雖經註冊, 亦屬無效; 而一切已繳費用, 概不退還。
I understand that the provision of any false or misleading information therein shall lead to disqualification of my application for admission and any resulting registration. Fees paid will not be refunded.

3. 學生行為(Student behavior)

本人明白須遵從學生手冊內所述事項和學院公佈的各項收費準則。學生手冊可向學院索取, 或於學院網頁下載/觀看。
I understand I have to follow the details listed in Student Handbook and fee charge announced by AINM. Student handbook can be taken from the school, or downloaded / read from the AINM's webpage.

4. 本人明白學院有權修改以上資料和學生手冊內容而無須特別通知。
I understand AINM can rectify the above details and Student Handbook particulars without notifying the applicant.

Signature and Date lines for applicant: _____ 44 申請人簽署 Applicant's Signature _____ 45 日期 Date

Staff verification section: 由本院填寫: 丁部資料 戊部資料 職員第一次核對簽署: _____ 職員第二次核對簽署: _____

由本院填寫 For Official Use Only