

**HKSAR Government Scholarship Fund  
 Endeavour Merit Award (EMA)  
 2021/2022 academic year  
 Nomination Form**

**A. Personal Particulars**

Surname : \_\_\_\_\_

Given name(s) : \_\_\_\_\_

Student No.: \_\_\_\_\_

Gender:  female  male \_\_\_\_\_

Place of Origin: \_\_\_\_\_

Programme of Study : \_\_\_\_\_

Level of Study : \_\_\_\_\_ Year of Study: \_\_\_\_\_

Discipline : \_\_\_\_\_

Cumulative GPA : \_\_\_\_\_

Type of SEN: \_\_\_\_\_

*(Please provide copies of documentation proof for verification purpose.)*

Have you received any other scholarship(s)/ award(s) in the 2020/2021 academic year?

Yes \_\_\_\_\_  No \_\_\_\_\_  
*(please provide details)*

**B. List of Academic/ Non-academic Achievement**

*(Please provide copies of documentation proof for verification purpose.)*

Year / Month	Detailed Description (e.g. Public examinations; Name of activity/competition, role of participation)	Organising party/parties	Awards / Certifications/ Achievements, etc
i.	_____	_____	_____
	_____	_____	_____
ii.	_____	_____	_____
	_____	_____	_____
iii.	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

### C. Supplementary Information in Support of this Application (if any)

### D. Declaration and Consent

(Participating institutions may add or remove terms according to the practice/ rules of the institutions)

1. I certify that all the information given is true and accurate. I understand that any inaccurate information will render the application invalid. Any award approved will be withheld and any payment made must be refunded to the HKSAR Government Scholarship Fund (the Fund).
2. I agree that the information provided will be used by the institution, the Fund Secretariat and related government bureaux / departments to process the application and for other related purposes.
3. I have read through the "[Information Notes on University Scholarships and Prizes](#)" and understand and agree the terms and conditions stated on the Information Notes.

Signature of applicant : \_\_\_\_\_

Telephone number : \_\_\_\_\_

Date : \_\_\_\_\_

### E. Recommendations (to be completed by Dean/Head of College/School/Department)

I wish to nominate the above student for award for the year. I am satisfied that this nominee has met the eligibility and has already fulfilled all the selection criteria.

**Institution Chop**

Authorised Signature  
For and on behalf of the institution : \_\_\_\_\_

Name of Authorised Person : \_\_\_\_\_

Post Title : \_\_\_\_\_

College/School: \_\_\_\_\_

Date : \_\_\_\_\_