

To: Director of Immigration

## 監護人授權同意書 Letter of Guardian Nomination

**Notes:**

1. 任何前往香港就讀之未滿18歲學生（以遞交學生簽證申請表時間為準）必須填寫並簽署此同意書。  
An applicant for entry for study in Hong Kong is required to provide a “Letter of Guardian Nomination” if he/she is under the age of 18 at the time of submitting the student visa application.
2. 請在方框內打勾(☑)及劃去不適用選項(✖)。  
Please complete the form in BLOCK letters, ☑ and ✖delete whichever is appropriate.

本人\_\_\_\_\_為\_\_\_\_\_（以下簡稱「該學生」）的父／母／合法監護人，茲同意該  
（父／母／合法監護人全名） （申請人全名）

學生前往香港科技大學修讀全日制本科課程。

I, \_\_\_\_\_, am a parent/guardian of \_\_\_\_\_ who  
(Full name of parent/guardian) (Full name of applicant)

will be undertaking studies at The Hong Kong University of Science and Technology (HKUST).

本人在此聲明：

I hereby consent

- 同意該學生在香港科技大學就讀、選擇主修、修讀科目、入住學生宿舍，並參與由學校在本港、中國大陸或海外舉行的各項學術或非學術活動，如實習計劃、培訓活動、社區服務、學生大使或學生助理、海外交流、遊學、體育活動及社會實踐訓練營等；  
To let my child/ward named above to study at HKUST, select program, enroll in subjects, reside in Student Halls of Residence and participate in the University’s academic or non-academic activities such as internships, placements, community services, the student ambassador or helper scheme, offshore exchanges, study tours or visits, sporting events and experiential camps held locally, on Mainland China or overseas and make any related decisions; and
- 並授權以下人士／單位作為該學生在港期間未滿18歲時的監護人。  
To authorize the following party as guardian of my child/ward named above in Hong Kong before he/she reaches 18 years old.

請授權予監護人或香港科技大學之代表（任選其一）。獲授權之監護人須為香港永久性居民。若不滿足此要求，請勾選第二項以授權香港科技大學之代表承擔監護責任。

**Please nominate EITHER authorized guardian or the representative of HKUST. Authorized Guardian should be a Hong Kong Permanent Resident, please authorize The Hong Kong University of Science and Technology serving as a representative to take up the role of guardian, if necessary.**

授權監護人姓名：\_\_\_\_\_（監護人全名）  
(Authorized Guardian Name) (Full name of authorized guardian)

與該學生關係：親戚／朋友／其他\*（請詳細說明\_\_\_\_\_）  
Relationship: Relative/friend/others\* (Please specify:\_\_\_\_\_)

在港地址（請填寫英文地址）：\_\_\_\_\_  
(Residential Address in English)

聯繫電話：\_\_\_\_\_（手機）\_\_\_\_\_（辦公室）\_\_\_\_\_（住址）  
(Contact telephone no.) (Mobile) (Office) (Home)

授權香港科技大學之代表 (The representative of HKUST)

本人理解並確認，香港科技大學在同意作為該學生的監護人時，並不代表香港科技大學對該學生承擔任何作為父母的責任；香港科技大學只在有需要或緊急事故時，作為該學生在香港與其父母及入境事務處之聯絡單位。

I understand and accept that, in taking up the role as a guardian in Hong Kong, the HKUST representative shall not be deemed to take up any parental responsibilities for the applicant and will serve solely as a contact person, for the benefit of the student's parents/guardian and the Hong Kong Immigration Department, when it becomes necessary or in case of emergency.

本人已經閱讀並接受以上的條款及細則。

I declare that I have read and accept the above conditions.

\_\_\_\_\_  
父／母／合法監護人姓名及簽署  
(Name and Signature of Parent/Guardian)

\_\_\_\_\_  
日期 (Date)

\_\_\_\_\_  
獲授權之監護人姓名及簽署  
(Name and Signature of Guardian in Hong Kong/Representative of HKUST)

\_\_\_\_\_  
日期 (Date)

\_\_\_\_\_  
學生姓名及簽署  
(Name and Signature of Student)

\_\_\_\_\_  
日期 (Date)