

For Office Use Only:

Invoice No.: \_\_\_\_\_ Account Ref No.: \_\_\_\_\_

Transcript sent on: \_\_\_\_\_

## The Hong Kong Institute of Chartered Secretaries

## Transcript Application Form (Students)

All registered students may apply for transcript at any time for **HK\$200** per copy\*. For those who wish to apply for such certification, please fill in the form below and return to the Secretariat with payment.

## APPLICATION FOR TRANSCRIPT

To: HKICS

I write to request for the certification of my examination status and *understand that TWO WEEKS will be needed for processing the certificate after receipt of my application by the Secretariat.* My personal particulars are given as below:-

Personal Details

Please complete in BLOCK CAPITALS

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

Name: \_\_\_\_\_ (Mr/Mrs/Miss/Ms) Chinese Name: \_\_\_\_\_

Correspondence Address (in English): \_\_\_\_\_

Correspondence Address (in Chinese): \_\_\_\_\_ Postal code: \_\_\_\_\_

(For students residing in Mainland China)

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

No. of copies requested: \_\_\_\_\_

Transcript(s) will be: (Please ✓ the appropriate box)

 collected in person sent to the above address sent to other institutions directly. Address as below:

Payment Method (Please tick as appropriate): \*The transcript application fee is non-refundable

 By EPS/ UnionPay - in person By cheque - in person/by post (Payable to 'HKICS'. Post-dated cheque will NOT be accepted)

Bank: \_\_\_\_\_ Cheque No.: \_\_\_\_\_

(Specify at back '[Description]' and '[Student No.]')

 By Credit Card - in person/by post (*I, as the cardholder, authorise HKICS to debit the payment from my credit card*)

Please fill in the below information if by post.

 Chartered Secretaries American Express VISA MasterCard

Name of Cardholder (Block letters): \_\_\_\_\_

Credit Card No.: \_\_\_\_\_ Card Expiry date: \_\_\_\_\_MM\_\_\_\_\_YY

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

(As with credit card)

If the cardholder and the applicant are not the same person, please explain basis for third party payments (e.g. employer payment).

Applicant to bear consequences for unauthorised third party payments: \_\_\_\_\_  
*To facilitate payment, credit cards should not expire in less than one month.*Statement on Collection of Personal Data

(i) Your supply of personal data to HKICS is on a voluntary basis.

(ii) The information provided by you to HKICS will be used for administration and management; membership admission, registration maintenance and administration; enforcement of members' compliance of the provisions of the Charter and Byelaws of ICSA and the Articles of Association of HKICS for the time being in force and related matters; communications; assessment of qualifications and experience; examinations; continuing professional development; surveys, analysis, research and development; promotion of the profession, ICSA and HKICS; and marketing and provision of services and benefits and organising activities to members, graduates and students.

(iii) The information provided by you herein may be made available to the related companies or associates, group sister associations, agents, contractors, business associates or service providers of the HKICS or other professional bodies or government bodies or regulators, as may be necessary for any of the above purposes.

(iv) Apart from the purposes stated above, your personal information will not be transferred to any other parties, unless such parties are authorised by law and request the information.

(v) Under the Personal Data (Privacy) Ordinance, you have a right to request access to and correction of your personal data. Such requests may be made in writing to our Data Protection Officer at 3/F, Hong Kong Diamond Exchange Building, 8 Duddell Street, Central, Hong Kong or by email to us at [privacyofficer@hkics.org.hk](mailto:privacyofficer@hkics.org.hk).

I have read and fully understood the above.

Signature: \_\_\_\_\_

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