

**HONG KONG LUNG FOUNDATION
FELLOWSHIP APPLICATION FORM**

PERSONAL DATA

1. Name in English :
Prof./Dr./Mr./Miss/Mrs. _____
(BLOCK LETTERS)

2. Name in Chinese : _____

3. Hong Kong Identity Card No. : _____

4. Nationality : _____

5. Place & Date of Birth : _____

6. Home Address : _____

7. Office Address : _____

8. Academic and Professional Qualifications

Qualifications

Awarding Institutions

Dates obtained

Recent
Photo
(1½" x 2")

Telephone : _____

Telephone : _____

Fax: _____

9. Memberships of Professional Association(s)/College(s) Dates

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please note that priority will be given to active members of the Hong Kong Thoracic Society.

10. Training/employment (in chronological order)

<u>Post</u>	<u>Unit/Dept. of Institution</u>	<u>From</u> (month/year)	<u>To</u> (month/year)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

11. Publications

12. Fellowship applied for :

- ☐ type 3a
- ☐ type 3b
- ☐ type 3c

Outline your proposed training programme, indicating the institutions involved and period of attendance (3a & 3b)/proposed attendance of conference (3c).

13. List out contributions and/or participations in the activities organized by the Hong Kong Thoracic Society and CHEST Delegation Hong Kong & Macau Ltd. (formerly the American College of Chest Physicians, Hong Kong & Macau Chapter) at least in the past one year.

14. Give the name(s) of the institution(s) you have applied for admission and if available, please attach a copy of the letter of acceptance.

15. Give particulars of any other scholarship(s)/award(s) which you have applied.

16. Indicate your future career plans after completion of the proposed training programme.

- 17 Have you been granted Hong Kong Lung Foundation Fellowship in the past 5 years? If yes, please state the date, amount and nature of training.

18. References & Supporting Documents

- a. Two References - one must be the supervisor

- b. Supporting Documents

- c. Certification from Chief of Service, Departmental Manager or other relevant authorities that study leave will be granted for you to undertake the Fellowship Programme.

19. ☐ I confirm that I have read the regulations governing the Fellowship carefully, and will sign the deed setting out acknowledgments and undertaking with the Foundation in respect of the fellowship award.

(Signature)

(Date)