



David C. Lam Institute for
East-West Studies (LEWI)
林思齊東西學術交流研究所

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LEWI Resident Graduate Student (RGS) Programme – Approval Form

Applicant Information

Full Name: _____ Title: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Current Degree: _____ Proposed Visiting Period: _____

Home Institution: _____

Proposed Supervisor at HKBU: _____

Home Institution Supervisor Information

Full Name: _____ Title: _____
Last First M.I.

Phone: _____ Email: _____

Job Title: _____ Department: _____

Disclaimer and Signature

I confirm that the student named above is in good standing, is registered full-time in a degree programme at the home institution, and has permission to enroll as a Resident Graduate Student at the Hong Kong Baptist University during the period indicated above.

By submitting this application, I understand and agree to the Hong Kong Baptist University's Privacy Policy Statement and Personal Information Collection Statement at <https://bupdpo.hkbu.edu.hk/policies-and-procedures/pps-pics/>.

I hereby certify that the information provided on this form, and that in any attached materials, are true and complete to the best of my knowledge.

Signature: _____ Date: _____