



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

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
*Surname* *Given Name(s)* *(Mr/Mrs/Miss/Ms/Dr/Prof)*

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Current Degree: \_\_\_\_\_ Proposed Visiting Period: \_\_\_\_\_

Home Institution: \_\_\_\_\_

Proposed Supervisor at HKBU: \_\_\_\_\_

### Home Institution Supervisor Information

Full Name: \_\_\_\_\_ Title: \_\_\_\_\_  
*Surname* *Given Name(s)*

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: \_\_\_\_\_