



The Hong Kong Polytechnic University
Department of Rehabilitation Sciences
RS Entry Scholarships for MSc students (2025-26)



Application Form

To promote Master's level of education for practitioners in occupational therapy, physiotherapy and rehabilitation sciences and hence to enhance practice and research in the fields, the Department of Rehabilitation Sciences is pleased to offer a scholarship scheme to support outstanding practitioners in pursuing the MSc study at PolyU.

I. Personal Data

Applicant Name: _____ (English) _____ (Chinese)
Date of Birth : _____
Place of Birth : _____
Occupation : _____
Company : _____
Contact No.: _____
E-mail Address: _____
Correspondence Address: _____ _____

II. Education Qualification (in chronological order)

a. Academic Attainment

Period of Study (MM/YY)		Name of School, Colleges, Universities etc. Attended/ Attending	Programme(s) of Study	Qualification (e.g. Diplomas, Bachelor, Master Degree etc.)	Academic Results (e.g. GPA, Class, Division)
	to				

b. Public Examination Results

Year	Name of Examination	Subjects and Grades

c. English Test Score

Test Date	Name of Test	Score/Grade

III. Scholarship/Academic Awards Received, if any:

(please list in priority order the scholarship /academic awards received in recent years)

Year	Name of Award/Scholarship	Issuing Authority

IV. Work Experience

Date (DD/MM/YY) (From To)	Name of Company	Position Held	Nature of Work

V. Clinical Work in the Rehabilitation Field

(please list the record in point form within 100 words and attach employer recommendation letter, if any)

VI. Commitment to Physiotherapy / Occupational Therapy / Rehabilitation Sciences Profession, experience in establishing the service validated by respective employment organizations and/or professional bodies

(please list the record in point form within 100 words)

VII. Declaration

1. I declare that the information provided by me in this form is complete and true to the best of my knowledge. I agree to provide original certificate(s) or verification of my qualifications when required.
2. I accept that if, in reading and completing this application, I knowingly or carelessly provided untrue or incomplete information, or failure to supply the full documentation for verification, any offer of scholarship and admission, whether accepted or not, may be withdrawn by the University and/or I may be required to withdraw from any programme which I am enrolled in.
3. I authorize the Department of Rehabilitation Sciences (RS) and the Academic Registry (AR) of The Hong Kong Polytechnic University (PolyU) to handle and use the personal data/information provided by me in this form, and any supplementary information as required by RS and AR for activities relating to the handling and assessment of this scholarship application may also be used for admission decision process.
4. I authorize PolyU to obtain, and relevant authorities to release, all information about my results in public examinations, and all information about my academic and/or professional qualifications.
5. I also authorize RS and AR to disclose the personal data provided to those relevant parties:
 - a. for the above mentioned purposes;
 - b. where I have given my consent to such disclosure; and
 - c. where such disclosure is authorized or required by law.
6. I understand I have the right to obtain access and request any corrections to the personal data provided by me in this application form. Such request should be addressed to the Academic Registry (AR) of PolyU in writing. I also understand this application form and the related copies submitted are not returnable.

Date

Signature of Applicant

Important note:

You are requested to attach photocopies of certificates, transcripts and other relevant documents to support the information given in your application. These copies are not returnable and will be verified in due course.