Application Form
Accreditation Grant for Self-financing Programmes
under the Qualifications Framework Fund

Notes for Applicants

- Applicants who wish to apply for Accreditation Grant for Self-financing programmes\(^1\) (the Accreditation Grant) should complete this application form.
- Applications for the Accreditation Grant should be made no later than one year after the issuance of the relevant Statement of Accreditation Approval (SOA) dated 3 January 2017 or after by the Hong Kong Council for Accreditation of Academic and Vocational Qualifications (HKCAA VQ).
- Applicants should read the Guidance Notes for the Accreditation Grant. Copy of the Guidance Notes can be downloaded from the QF website (www.hkqf.gov.hk).
- Applicants should ensure that all parts in the form are fully completed and the information is accurate. The application will not be processed if the applicant fails to provide all the information requested.
- When submitting the application form, the applicant should enclose the following documents:
  (a) **Original** copy of -
    - Payment receipts of accreditation fees issued by HKCAA VQ;
    - Debit Notes and/or Credit Notes of accreditation fees issued by HKCAA VQ;
    - A letter from the non-local partner authorising the local operator of the non-local programmes to apply for the Accreditation Grant, if applicable;
    - A self-declaration from the non-local partner to substantiate their non-profit-making status in the countries concerned, if applicable; and
  (b) **Photocopy** of -
    - Accreditation Report and SOA issued by HKCAA VQ;
    - Email/correspondence issued by HKCAA VQ advising the breakdown of accreditation fees for Initial Evaluation (IE) /Institution Review (IR) /Learning Programme Accreditation (LPA) /Learning Programme Re-accreditation (Re-LPA) exercises and/or individual learning programmes;
    - Documents certifying that the organisation is registered under the laws of Hong Kong;
    - Printout of the Qualifications Register (QR) records;
    - A non-profit-making organisation should submit a copy of the letter of exemption from tax issued by the Inland Revenue Department confirming that it is an approved charitable institution or trust of a public character exempt from tax under the Inland Revenue Ordinance (Cap. 112). Non-local partners are required to submit relevant supporting documents to substantiate their non-profit-making status in the countries concerned;
    - Certificate of registration of a Course/letter of exemption from registration for non-local programmes;
    - Sample certificate of the programme(s) in which QF\(^2\) is featured, if applicable.

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\(^1\) Self-financing programmes refer to programmes other than publicly-funded programmes offered by the eight institutions funded by the University Grants Committee, Hong Kong Academy for Performing Arts, Vocational Training Council and Prince Philip Dental Hospital. If self-financing programmes are offered by the aforesaid institutions, supporting documents showing that the programmes are offered on self-financing basis are required.

The breakdown of accreditation fees provided by HKCAAVQ should be “Certified true copy and correct”. All original supporting documents should be “Certified correct”. All photocopied supporting documents should be “Certified true copy”. The name and signature of the certifying officer (i.e. the Applicants or his/her authorised officer) should be clearly indicated. Samples of the certification of supporting documents are at Appendix.

The personal data provided in this form will be used by the Secretary for Education for processing application for the Accreditation Grant. It may be disclosed to officers within or outside the Education Bureau who are required to handle the Accreditation Grant.

Applicants have the right to request access to or correction of personal data provided in this form in accordance with the provisions of the Personal Data (Privacy) Ordinance (Cap. 486). Such requests may be made in writing to the Education Bureau.

All correspondence should be addressed to Further Education Division, Education Bureau on 7/F, East Wing, Central Government Offices, 2 Tim Mei Avenue, Tamar, Hong Kong (Telephone no: 3509 7425, Fax no: 2899 2967).
Application Form

Accreditation Grant for Self-financing Programmes under the Qualifications Framework Fund

Part A  Particulars of Applicant

Name of Organisation
(English)  

(Chinese)  

(Please ensure the organisation name has been consistently presented in the application form and all the supporting documents.)

Name of Branch / Subsidiary / Unit / Department / Section (if the name of Organisation is different from the name on the Accreditation Reports and Statement of Accreditation Approval issued by HKCAAVQ)

(English)  

(Chinese)  

Correspondence
Address  

Tel No.  Fax No.  

Website (if applicable)  

Name of Representative
(English)  

(Chinese)  

Tel No.  Fax No.  

E-mail Address  

Name of Contact Person (if differs from the Representative)
(English)  

(Chinese)  

Tel No.  Fax No.  

E-mail Address  

[August 2019]
Part B  Application for the Accreditation Grant for Self-financing Programmes  
(Accreditation Grant)

I, ________________________________ (name of representative), on behalf of ________________________________ (name of organisation), hereby submit an application for the Accreditation Grant in respect of the following:

(Please use supplementary sheet if the space provided is insufficient)

<table>
<thead>
<tr>
<th>Initial Evaluation (IE)/Institution Review (IR) *</th>
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<tbody>
<tr>
<td>QF Level</td>
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<table>
<thead>
<tr>
<th>Learning Programme Accreditation (LPA)/Re-accreditation (Re-LPA)*</th>
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<tbody>
<tr>
<td>Title of Learning Programme(s)</td>
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Total:

# Please indicate by inputting “SCS”, “SGC” or “VQP” if the programme is a SCS-based/ SGC-based/ VQP-based course, as appropriate.
Part C  Confirmation by Applicant *(Please tick where appropriate)*

I hereby confirm that:

☐ The IE/IR/LPA/Re-LPA* exercises listed in **Part B** have been successfully accredited by the Hong Kong Council for Accreditation of Academic and Vocational Qualifications (HKCAA VQ). A copy of the Accreditation Report and Statement of Accreditation Approval issued by HKCAA VQ is attached.

☐ The programme(s) listed in **Part B** have been registered in the Qualifications Register (QR). A copy of the printout of the QR records is attached.

☐ The Programme(s) listed in **Part B** are self-financing programme(s).

☐ The organisation which I represent is registered under the laws of Hong Kong as listed below:

________________________________________________________________________

A copy of the relevant registration certificate is attached (mainly applicable to organisations registered under the Education Ordinance (Cap. 279), Post Secondary Colleges Ordinance (Cap. 320), Companies Ordinance (Cap. 622) or Business Registration Ordinance (Cap. 310)).

☐ The organisation which I represent is a non-profit-making organisation. A copy of letter from the Inland Revenue Department confirming exemption from tax is attached.

☐ The organisation which I represent has not made the same claim from any government funding and will not seek reimbursement/financial subsidies of the accreditation fees from any parties other than Education Bureau (EDB) subject to approval of this application. (Please specify if otherwise: __________________________________________________________________________)

☐ The certificate of the programme(s) listed in **Part B** features all three key elements of QF (i.e. QF logo, QF level and QR registration number). A copy of the sample certificate is attached.

For non-local learning programmes

☐ The programme(s) listed in **Part B** is/are non-local programme(s) registered or exempted from registration under Non-local Higher and Professional Education (Regulation) Ordinance (Cap. 493). A copy of the Certificate of registration of a course/letter of exemption from registration is attached.

☐ The organisation which I represent is authorised by my non-local partner(s) to apply for the Accreditation Grant. Authorisation letter(s) from my non-local partner(s) is attached.

☐ Self-declaration and supporting document(s) from my non-local partner(s) proving their non-profit-making status in the countries concerned are attached.

* Please delete where inapplicable

Part D  Declaration

I, on behalf of, _____________________________________________ (name of organisation), declare that all information given above is true and accurate and that if I wilfully give information which is false or which I do not believe to be true or if I withhold any material information, any Accreditation Grant approved will become void and any sums received by me or my organisation must be refunded to the Government immediately and that I or my organisation is to be responsible for all costs (whether directly or indirectly) incurred by the Government for the recovery of the Accreditation Grant.
Part E  Payment Instruction

If this application is successful, please arrange payment by sending a cheque as follows-

Name of payee: ____________________________
(Must be the bank account of the Applicant organisation or its parent organisation)

Mailing address: ____________________________
(if differs from Part A)

Any other information: ____________________________

Part F  Undertaking

I undertake that I and my organisation will:

(1) promote the relevant qualification(s) and programme(s) as QF-recognised and the relevant programme(s) with QF logo\(^3\) shown in all relevant promotion and publicity materials;

(2) provide information on the operation of the relevant programme(s) upon request by the Education Bureau after receiving the Accreditation Grant; and

(3) abide by any other terms and conditions which may be imposed by the Secretary for Education on the relevant QF-recognised qualification(s) and programme(s).

Signature: ____________________________
Organisation Chop

Name of Representative: ____________________________

Post-title: ____________________________

Date: ____________________________

Name of Authorised Officer: ____________________________

Post-title: ____________________________

Date: ____________________________

[The following part will only be required if the payment receipts and/or other supporting documents are not certified by the Representative in Part F personally]

Specimen Signature: ____________________________

Name of Authorised Officer: ____________________________

Post-title: ____________________________

Date: ____________________________

Education Bureau
August 2019

\(^3\) For details on the use of the QF logo, please refer to the Guideline for the Use of QF Logo in the QR (https://www.hkqr.gov.hk/HKQRPRD/export/sites/default/content/attachment/en/-EN-4_Advert-1_QF-Guidelines-for-the-Use-of-the-QF-Logo.pdf).