

Authorisation Letter

To: Academic Regulations and Records Office
City University of Hong Kong

Date: _____

Dear Sir / Madam,

I, _____ / _____ / _____
(Full Name) (CityU Student Number) (Degree & Major Code)

hereby authorise _____ / _____ to
(Full Name of the Person) (HKID Number/ Passport Number)

represent me to perform the below action.

Please tick the appropriate box(es):

Submission of:

- Application for Academic Transcript
- Application for Certified True Copy of Academic Document
- Application for Letter of Certification
- Application for Replacement Award Certificate
- Application for Testimonial

Collection of:

- Academic Transcript
- Certified True Copy of Academic Document
- Letter of Certification
- Award Certificate
- Replacement Award Certificate
- Testimonial

A copy of my ***HKID Card or Passport** (essential for collection of award certificate related documents)/ **Student ID Card** is attached for your verification and it will be returned to my representative after inspection.

My representative understands that ***he/ she** would be required to produce ***his/ her** HKID Card or passport for identification and record purpose when performing the above action for me.

I also confirm that my representative shall have the authority to sign for acknowledgement of the receipt of the said document. I understand that I shall be fully responsible for the undelivery, if any, of the said document from my representative.

Yours faithfully,

(signature)

* Please delete as appropriate