申請成績報告表

# REQUEST FOR TRANSCRIPT

|  |
| --- |
|  **Alliance Bible Seminary**22 Cheung Chau Peak Road, Cheung Chau, Hong KongTel: 3657 4734, 791 Fax: 2981 9777 E-mail: **registra@abs.edu** |

 # 表內所有費用以該年度財務部公佈的為準，敬請留意。

**STUDENT’S NAME AND ADDRESS** (學生╱校友姓名及地址)

Name (英文)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (中文)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (地址)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel.(H)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(O)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(M)\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Fax\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please print clearly only one address per form. 請清楚列明成績表將寄交的機構╱院校及地址 (每份限寫一個地址)

Please allow 7-10working days for processing. 成績表約需七至十個工作天完成 (提醒：請以現金繳款, 切勿以物代費用支付)

|  |
| --- |
|   Mail To (寄達) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name (院校╱機構聯絡人)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address (地址)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (自取填個人地址) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

Student Signature (學生╱校友簽名)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date(日期)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

註：每份成績表(以學位計算)各收費**HK$200** (2022.9起新修訂#)，同時間申請(同一學位計)兩份或以上，第二份及

 其後每份收費HK$**100**。請填妥擬申請進修的院校名稱，教務長或註冊主任姓名與職銜，以便本處直接寄

 往擬進修之有關院校╱機構(此表格可以影印)，可電郵或郵寄回本院「註冊處」。(以上費用包括郵費或寄海外掛號費)

|  |  |
| --- | --- |
|  No. of Copies 成績表份數 |  HK ID / Passport No. 香港身份證╱護照號碼 |
|  Currently Enrolled 現今修讀： YES是 □ NO否 □ |  Student No. 學號 |
|  First Year Attended 入學日期 |  Last Year Attended 離校╱畢業日期 |

**DEGREE PROGRAMS STUDIED** (修讀課程名稱) *Please fill in 請填寫* **⬜ 中文版 ⬜ 英文版** 不設電子版

□ Certificate (證書) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Bachelor/Associate degree (學士/副學士) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Diploma (文憑) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Master (碩士) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Doctor (博士) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Other (其他) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Postal / collect request** (請選擇以下方式寄出或收取)

□ 電郵(PDF版-只限代直接寄院校/機構)(自取正本□), □ 郵寄(如需掛號 □) □ Fax (傳真) □ 自取(長洲 □ /灣仔 □)

□ 其他 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (特殊性需要)

## FOR OFFICE USE ONLY

|  |  |
| --- | --- |
|  No. of Copies |  Date Received |
|  Transcript Fee |  Date Mailed |
|  Payment/cheque no.  |  Receipt no. |

**Payment**付款方法：Please make bank draft, money order or crossed cheque payable to “Alliance Bible Seminary”，

or deposit / transfer in cash to ABS-HK Bank A/C 063-156582-001, and return your receipt directly to Registration Office.

請用匯票或劃線支票，以抬頭「建道神學院」付款，或將費用以現金或轉賬存入本院匯豐銀行往來戶口063-156582-001，後將存款收據正本及此表電郵或寄回本院註冊處。成績表將會在收到費用後**直接**寄往院校/寄出.

2023.8.30

#  Registration Office



#  Alliance Bible Seminary

#  22 Peak Road, Cheung Chau, Hong Kong Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Type, print or ,fill (in block letter) in the address box below*

*the name and address of the company or institution to The enclosed\_\_\_\_\_ copy / copies of transcript(s) is/are*

*which the transcript(s) is/are to be sent sent at the request of*

|  |  |  |
| --- | --- | --- |
|   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | Who is applying for□ studies in □ a position of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |