Students admitted to a full-time undergraduate course of study for a degree at The Chinese University of Hong Kong should follow the regulations prescribed in the *General Regulations Governing Full-time Undergraduate Studies*\(^1\), which is contained in the online Undergraduate Student Handbook at [www.cuhk.edu.hk/aqs/handbook/ug_student_handbook.htm](http://www.cuhk.edu.hk/aqs/handbook/ug_student_handbook.htm). When there are non-complying cases, Departments and Faculties are reminded to refer to these *Regulations*. Some of the most commonly applied *Regulations* are summarized in Appendix 1.

**Waiver Recommendations**

The following procedures should be observed when a Faculty plans to submit waiver recommendations to the Senate APC:

1. Analyze the case and determine the exact Regulation(s) to be waived;
2. Make sure the student’s letter of appeal has mentioned the relevant Regulation(s) to be waived;
3. Collect any relevant supplementary documents from the student concerned;
4. Seek endorsement from the Department Board and Faculty Board concerned\(^2\); and
5. Observe the timeline and submit the case to the Senate APC c/o Academic and Quality Section of the Registry, together with the following documents:
   - Cover paper, one for each case if there are more than one case, which documents the detailed justification [see Sample in Appendix 2];
   - The *Recommendation Form for Discontinuation Waiver* duly signed by both the Department Chairman / Programme Director and Faculty Dean concerned [for discontinuation cases only, see Appendix 3];
   - Document(s) indicating approval by the Department Board and Faculty Board concerned;

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\(^1\) Students admitted to the undergraduate Medical Studies should refer to the *Regulations Governing Undergraduate Medicine Programme*.

\(^2\) A waiver recommendation (especially discontinuation waiver cases) should have normally been seen by the Faculty Committee on Academic Advising before it is put to the Department Board and Faculty Board for consideration.
- Unofficial copy of the student’s academic transcript;
- Student’s letter of appeal for the waiver, submitted together with an English translation if the student’s letter is written in Chinese;
- Medical certificate issued by a registered medical practitioner, for example, certification indicating that the student is fit for study is required if the student appeals for immediate continuation of study. If the student consulted a Chinese medical practitioner, endorsement from the Director of University Health Service is required [for applications on medical grounds only]; and
- Other supporting documents as appropriate, such as counselling report, study plan of the student concerned, “Report on Meeting with Student” in Annex 9 of the *Handbook on the Implementation of the Academic Advisory System*\(^3\), etc.

Academic and Quality Section
June 2018

\(^3\) URL: [http://www.cuhk.edu.hk/english/teaching/academic-advisory-system.html](http://www.cuhk.edu.hk/english/teaching/academic-advisory-system.html)
### General Regulations Governing Full-time Undergraduate Studies

for students admitted under the 3-year and 4-year curricula

<table>
<thead>
<tr>
<th>No.</th>
<th>Nature of Waiver Application</th>
<th>General Regulations under the 3-year curriculum (Note 1)</th>
<th>General Regulations under the 4-year curriculum</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Reinstatement of studies</td>
<td>4.9</td>
<td>11.1 or 13.1 in the Regulations Governing Undergraduate Medicine Programme</td>
</tr>
<tr>
<td>2</td>
<td>Extension of maximum period of study</td>
<td>5.5 or its equivalent in other regulations for professional programmes</td>
<td>Note 2</td>
</tr>
<tr>
<td>3</td>
<td>Reduced course load</td>
<td>7.1 or its equivalent in other regulations for professional programmes</td>
<td>Note 2</td>
</tr>
<tr>
<td>4</td>
<td>Extension of leave of absence beyond 2 years</td>
<td>11.4</td>
<td>8.4</td>
</tr>
<tr>
<td>5</td>
<td>Reduced course load for certain students union officers</td>
<td>12.1 (Submit to the Senate direct)</td>
<td>Note 2</td>
</tr>
<tr>
<td>6</td>
<td>Continuation of studies</td>
<td>15.2 or its equivalent in other regulations for professional programmes</td>
<td>10.4 or 4.3 in the Regulations Governing Undergraduate Medicine Programme</td>
</tr>
</tbody>
</table>

**Note 1:** The General Regulations herein refer to the existing General Regulations Governing Full-time Undergraduate Studies. Some professional programmes have their own sets of regulations and the Programme/ Faculty concerned should refer to the respective programme regulations for the equivalent clause(s).

**Note 2:** Under the General Regulations Governing Full-time Undergraduate Studies for students admitted in and after 2012-13 under the 4-year curriculum, it is no longer necessary to seek approval from the Senate APC for (i) extension of maximum period of study and (ii) reduced course load. Similarly, approval from the Senate is also not required for reduced course load application for certain students union officers.

October 2014
THE CHINESE UNIVERSITY OF HONG KONG

Senate APC Paper

Waiver of the General Regulations Governing Full-time Undergraduate Studies

1. [A brief description of the student's academic profile and reason why s/he is seeking a waiver(s).]

2. [Regulation(s) XX] of the General Regulations Governing Full-time Undergraduate Studies stipulate(s) that:

   [Please quote the relevant Regulation(s)]

3. [Student’s explanation and justification/supplementary information from the Department and Faculty, with details to be provided in the Attachments.]

4. The Senate APC is invited to consider the recommendation of the [Board of the Faculty concerned] to grant a waiver of [Regulation(s) XX] of the General Regulations Governing Full-time Undergraduate Studies to the student so as to allow the student to [XXX].

[Date]
Attachments
Waiver for Consideration by the
Senate Academic Planning Committee
[for discontinuation cases only]

Personal particulars

Name of Student: __________________________ University Student ID: __________________________

Programme: ________________________________

Faculty: ________________________________

Request for the waiver and reasons

Regulation(s) to be waived: ________________________________

Reason(s) stated by the student [Note1]: ________________________________

Record of academic probation

(I) On academic probation for ____ term(s) (please state the number) in ____________ (please state the exact term(s) and year(s))

(II) On extended probation for ____ term(s) (please state the number) in ____________ (please state the exact term(s) and year(s))

Academic advice and other services provided by the University to the student

<table>
<thead>
<tr>
<th>Academic advice – to be completed and signed by the Academic Advisor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Period receiving academic advice: ________________________________</td>
</tr>
<tr>
<td>Name(s) and level(s) of Academic Advisor(s): ________________________________</td>
</tr>
<tr>
<td>Level I / II (delete as appropriate)</td>
</tr>
<tr>
<td>Brief statement on nature and outcome of academic advice [Note2]: ________________________________</td>
</tr>
<tr>
<td>Signature: ________________________________ Date: ________________________________</td>
</tr>
</tbody>
</table>
### Counselling service – to be completed and signed by University Counsellor(s) – if applicable

Period receiving counselling service: ____________________________

Name(s) of University Counsellor(s): ____________________________

Brief statement on nature and outcome of counselling service provided [Note²]: ________________

| Signature: ____________________________ | Date: ____________________________ |

### Medical/psychological service – to be completed and signed by University Physician(s) – if applicable

Period receiving medical/psychological service (delete as appropriate): ____________________________

Name(s) of University Physician(s): ____________________________

Brief statement on nature and outcome of medical/psychological service provided [Note²]: ________________

| Signature: ____________________________ | Date: ____________________________ |

### Other information [Note²]:

<table>
<thead>
<tr>
<th>Signature of Department Chairman/ Programme Director</th>
<th>Signature of Faculty Dean</th>
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<tr>
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</tbody>
</table>

| Date: ____________________________ | Date: ____________________________ |

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**Notes:**

1. The student’s appeal letter, record of academic result and any documents in support of the case, such as the “Report on Meeting with Student” (URL: [http://www.cuhk.edu.hk/english/teaching/academic-advisory-system.html](http://www.cuhk.edu.hk/english/teaching/academic-advisory-system.html)) should be attached. If medical/psychological reasons are suggested, medical certifications/psychological assessment reports should also be attached.

2. Please attach any additional information as deemed necessary.