

# **THE CHINESE UNIVERSITY OF HONG KONG**

## **THE PROVIDENCE FOUNDATION**

### **OUTWARD BOUND UNDERGRADUATE PROGRAMME 2008/2009**

#### **BACKGROUND**

The Providence Foundation donates scholarships, bursaries as well as outward bound awards to tertiary institutions in Hong Kong. This year, the Foundation will offer 24 awards for a 7-day Outward Bound Training in Outward Bound Hong Kong to students of The Chinese University of Hong Kong.

#### **OBJECTIVES**

The programme aims at developing and improving participants' decision making, communication, leadership, problem solving and team-building skills.

#### **SELECTION CRITERIA**

Candidates should

- ◆ be aged between 17-25;
- ◆ be proficient in written English;
- ◆ have good academic background and common sense;
- ◆ be in good health condition;
- ◆ have good team spirit, leadership and organization skills; and
- ◆ be an undergraduate in any discipline but preference will be given to business students.

#### **PROGRAMME**

This is a 7-day programme which will be held from May 24-30, 2009. Further details of the programme will be furnished to the successful candidates in future.

#### **EXPENSES**

The original course fee of the programme is HK\$4,850. Among which, \$3,500 will be sponsored by the Providence Foundation. The remaining balance, HK\$1,350, will be payable by the participant.

#### **INSURANCE**

The course fee does NOT include insurance. Students are required to join the Voluntary Personal Accident Insurance scheme (with a premium of HK\$90) through the Outward Bound Hong Kong. Applicants may also purchase additional insurance by himself/herself.

## **OBLIGATIONS**

Selected candidates will be required to:

- ◆ sign an undertaking;
- ◆ attend the pre-programme briefing in May 2009;
- ◆ attend all sessions of the 7-day Outward Bound Training;
- ◆ submit individual and group post-training reports within 3 weeks upon completion of the programme; and
- ◆ abide by all instructions and regulations stipulated by the Office of Student Affairs, the Outward Bound School and the Providence Foundation.

## **APPLICATION PROCEDURES**

A completed application form together with the following documents should be submitted to the Student Services Centre of the Office of Student Affairs on 1/F Benjamin Franklin Centre **on or before March 27, 2009.**

- ◆ a copy of HKID card;
- ◆ a copy of academic transcript(s);
- ◆ a copy of award(s) or scholarship(s);
- ◆ a recommendation form; and
- ◆ 1 passport-sized photo with your name and student ID written at the back (Successful candidates will have to submit one more photo upon signing the undertaking)

Application forms are available at the Student Services Centre of the Office of Student Affairs on 1/F Benjamin Franklin Centre. You may also download the application form from the website at [www.cuhk.edu.hk/osa/outwardbound09.pdf](http://www.cuhk.edu.hk/osa/outwardbound09.pdf)

## **NOMINATIONS**

Successful candidates will be notified by the Office of Student Affairs in April 2009 upon approval from the Providence Foundation.

## **ENQUIRIES**

For enquiries, please contact Ms. Gladys Poon (Tel: 2609-7210; E-mail: [gladys@osa.cuhk.edu.hk](mailto:gladys@osa.cuhk.edu.hk)) or Ms. Zita Wan (Tel: 2696-1738; Email: [zita@cuhk.edu.hk](mailto:zita@cuhk.edu.hk)) of the Office of Student Affairs.

Student Activities and Amenities Section

Office of Student Affairs

February 2009

# The Chinese University of Hong Kong

## The Providence Foundation Outward Bound Undergraduate Programme 2008/2009

### Application Form

*The information provided will be used for awards-related purposes in the University. It may be accessible to offices, committees or persons who will process these awards. Information of unsuccessful candidates will be destroyed upon completion of the programme.*

Photo

#### 1. Applicant's Particulars:

Applicant's Name (English) \_\_\_\_\_ (Chinese) \_\_\_\_\_

Gender \_\_\_\_\_ HKID No. \_\_\_\_\_ Student ID No. \_\_\_\_\_

Major \_\_\_\_\_ Minor \_\_\_\_\_ Year \_\_\_\_\_

College \_\_\_\_\_ Date & Place of Birth \_\_\_\_\_ Age \_\_\_\_\_

Length of Residence in Hong Kong \_\_\_\_\_ Nationality \_\_\_\_\_

Correspondence Address \_\_\_\_\_

Contact Tel \_\_\_\_\_ E-mail Address \_\_\_\_\_

#### ***Academic Results:***

Grade Point Average      1<sup>st</sup> Year \_\_\_\_\_      2<sup>nd</sup> Year \_\_\_\_\_      3<sup>rd</sup> Year \_\_\_\_\_

#### ***Awards/Academic Distinctions/Scholarships: (you may attach extra sheet if necessary)***

Name of Award

Academic Year

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_



**2. Medical/Health Condition - Have you suffered from the followings: (please tick)**

- |                  | <u>Yes</u> | <u>No</u> |              | <u>Yes</u> | <u>No</u> |
|------------------|------------|-----------|--------------|------------|-----------|
| 1. Diabetes      | _____      | _____     | 4. Epilepsy  | _____      | _____     |
| 2. Heart Disease | _____      | _____     | 5. Asthma    | _____      | _____     |
| 3. Stroke        | _____      | _____     | 6. Allergies | _____      | _____     |
7. Other than the above, are there any other factors relating to your health which will require special attention during the Outward Bound Training (please state):  
\_\_\_\_\_  
\_\_\_\_\_
8. Have you had a major operation in the last 10 years?      Yes \_\_\_\_ No \_\_\_\_\_  
If yes, what is it for? \_\_\_\_\_

**3. Emergency Contact**

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Tel (Daytime) \_\_\_\_\_ (Evening) \_\_\_\_\_

**4. Authorization**

I hereby authorize the Office of Student Affairs of The Chinese University of Hong Kong to obtain any information from other units of the University which they deem necessary and relevant to the administration and assessment of my application for the captioned award.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

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- |   |
|---|
| <p><u>Notes:</u> 1. Completed application form together with supporting documents should be submitted to the Student Services Centre of the Office of Student Affairs, 1/F Benjamin Franklin Centre <b>on or before March 27, 2009.</b></p> <p>2. Awardee is required to submit an individual report and a group post-training report to the Office of Student Affairs <b>on or before June 19, 2009.</b></p> |
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THE CHINESE UNIVERSITY OF HONG KONG

THE PROVIDENCE FOUNDATION  
OUTWARD BOUND UNDERGRADUATE PROGRAMME 2008/2009

**RECOMMENDATION FORM**

Name of applicant \_\_\_\_\_  
Student ID \_\_\_\_\_  
Department/ Faculty \_\_\_\_\_  
  
Name of referee \_\_\_\_\_  
Department/ Faculty of referee \_\_\_\_\_  
Title \_\_\_\_\_  
Correspondence address \_\_\_\_\_  
  
Telephone number \_\_\_\_\_

(For official  
use only)

To be completed by the referee

Please complete the following based on your knowledge of the above applicant:

|                                | <u>Excellent</u> | <u>Good</u> | <u>Average</u> | <u>Fair</u> | <u>Poor</u> |                          |
|--------------------------------|------------------|-------------|----------------|-------------|-------------|--------------------------|
| Proficiency in written English | [5]              | [4]         | [3]            | [2]         | [1]         | <input type="checkbox"/> |
| Organization Skills            | [5]              | [4]         | [3]            | [2]         | [1]         | <input type="checkbox"/> |
| Leadership Skills              | [5]              | [4]         | [3]            | [2]         | [1]         | <input type="checkbox"/> |
| Independence                   | [5]              | [4]         | [3]            | [2]         | [1]         | <input type="checkbox"/> |
| Interpersonal Skills           | [5]              | [4]         | [3]            | [2]         | [1]         | <input type="checkbox"/> |

I  HIGHLY RECOMMEND  RECOMMEND  DO NOT RECOMMEND  
the applicant to receive the outward bound training.

Other comments:

\_\_\_\_\_  
\_\_\_\_\_

**Please send this completed form to Ms. Gladys Poon of the Office of Student Affairs, 1/F, Benjamin Franklin Centre on or before March 27, 2009.** All information will be treated in strict confidence. Should there be any queries, please contact Ms. Gladys Poon at 2609 7210.

Signature of referee: \_\_\_\_\_ Date: \_\_\_\_\_