

**HONG KONG LUNG FOUNDATION  
FELLOWSHIP APPLICATION FORM**

**PERSONAL DATA**

1. Name in English :  
Prof./Dr./Mr./Miss/Mrs. \_\_\_\_\_  
(BLOCK LETTERS)

2. Name in Chinese : \_\_\_\_\_

3. Hong Kong Identity Card No. : \_\_\_\_\_

4. Nationality : \_\_\_\_\_

5. Place & Date of Birth : \_\_\_\_\_

6. Home Address : \_\_\_\_\_

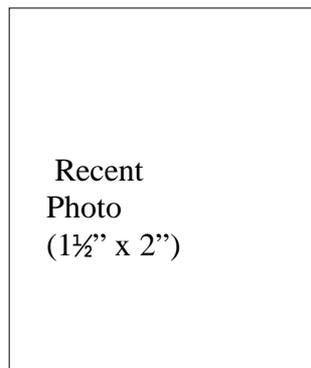
\_\_\_\_\_  
\_\_\_\_\_

7. Office Address : \_\_\_\_\_

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

8. Academic and Professional Qualifications

<u>Qualifications</u>	<u>Awarding Institutions</u>	<u>Dates obtained</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



Telephone : \_\_\_\_\_

\_\_\_\_\_

Telephone : \_\_\_\_\_

\_\_\_\_\_

Fax: \_\_\_\_\_

9. Memberships of Professional Association(s)/College(s)      Dates

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

*Please note that priority will be given to active members of the Hong Kong Thoracic Society.*

10. Training/employment (in chronological order)

<u>Post</u>	<u>Unit/Dept. of Institution</u>	<u>From</u> (month/year)	<u>To</u> (month/year)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

11. Publications

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

12. Fellowship applied for :

- type 3a
- type 3b
- type 3c

Outline your proposed training programme, indicating the institutions involved and period of attendance (3a & 3b)/proposed attendance of conference (3c).

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13. List out contributions and/or participations in the activities organized by the Hong Kong Thoracic Society and CHEST Delegation Hong Kong & Macau Ltd. (formerly the American College of Chest Physicians, Hong Kong & Macau Chapter) at least in the past one year.

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14. Give the name(s) of the institution(s) you have applied for admission and if available, please attach a copy of the letter of acceptance.

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15. Give particulars of any other scholarship(s)/award(s) which you have applied.

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16. Indicate your future career plans after completion of the proposed training programme.

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17. Have you been granted Hong Kong Lung Foundation Fellowship in the past 5 years? If yes, please state the date, amount and nature of training.

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18. References & Supporting Documents

- a. Two References - one must be the supervisor

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- b. Supporting Documents

- c. Certification from Chief of Service, Departmental Manager or other relevant authorities that study leave will be granted for you to undertake the Fellowship Programme.

19.  I confirm that I have read the regulations governing the Fellowship carefully, and will sign the deed setting out acknowledgments and undertaking with the Foundation in respect of the fellowship award.

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(Signature)

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(Date)