



HONG KONG SHUE YAN UNIVERSITY
MASTER OF SOCIAL WORK

Transcript Request Form

Applicant should complete **PART A** and send it to your appropriate officer of institution from which the transcript is requested.

PART A Personal information

Applicant's Name: _____ (_____)
(English) (Chinese)

Contact Phone: _____

University/Institution Attended: _____

Date of Attendance: From _____ to _____

Date of Award: _____

PART B: Programme applied for admission at HKSYU

Postgraduate Admission Office
Master of Social Work programme
Department of Social Work
Hong Kong Shue Yan University
10 Wai Tsui Crescent, Braemar Hill,
North Point, Hong Kong

Part C: To the officer responsible for issuing transcripts

The above applicant has applied for admission to Master of Social Work (2024-25) at Hong Kong Shue Yan University. Please send an official transcript together with this form to the above-mentioned address (PART B)