

Authorization Letter

To: Academic Regulations and Records Office
City University of Hong Kong

Date: _____

Dear Sir / Madam,

I, _____ / _____ / _____
(full name) (CityU student number) (degree & major code)

hereby authorize _____ / _____ to:
(name of the person) (HKID or Passport no.)

(Please tick the appropriate box)

- submit the application for *academic transcript/certified true copies of academic document/letter of certification/testimonial
- collect, on my behalf, the * academic transcript/certified true copies of academic document/letter of certification/testimonial

A photocopy of my *Student ID Card / HKID Card / Passport is attached for your verification and it will be returned to my representative after inspection.

My representative understands that *he / she would be required to produce *his / her HKID card or passport for identification and record purpose when *submitting the application/collecting the said document for me.

I also confirm that my representative shall have the authority to sign for acknowledgement of the receipt of the said document. I understand that I shall be fully responsible for the undelivery, if any, of the said document from my representative.

Yours faithfully,

_____ (signature)

** Please delete as appropriate*