

Application Form for Affiliate member of The Accounting and Finance Graduates Association of The Hong Kong Polytechnic University Limited (AFGA)

會駿會

Personal Particulars 個人資料

Section 1																	_
(to be completed in BLOCK letters 請用正階填寫)																	
Name: (English 英文)																	
(Chinese 中文)	Sex 性別:													_			
(The name should be identical to that	appeared	on the	Hong	Kong	Iden	ity Ca	ırd (刃		具香港	き 身代	分證	上之	と姓名	相同])		
Hong Kong Identity Card No. 香港身	份證號碼	.							()							
Section 2																	
Correspondence Address 通訊地址:																	_
Telephone No. 電話號碼:					F	ax. N	o. 圖	文傳	真號码	馬: _							
 E-Mail 電子郵件:													(PolyU	J理コ	<u>[</u>)	
														Other	·s 其作	也)	
 Mobile Phone No. 流動電話號碼:																	
																	_
Section 3																	
Dept 所屬學系:								_									
Title of Course Attending 課程:								_									
Year of Study 就讀班級:								_									
PolyU Student No. 理工學生證:																	
I confirm that the information given a confidence by The Accounting and Fi 料將被保密。			_											_			
Signature by Applicant 申請人簽署:							_	Date	日期]: _							_

Completed form can be returned to Dr. Jody Wong of the School of Accounting and Finance, Room M717, Li Ka Shing Tower, or via e-mail to afjody@inet.polyu.edu.hk.