

**New Asia College, The Chinese University of Hong Kong**  
**Application for Funding Support under the**  
**United Asia Finance Visiting Scholars Programme**  
*(For attendance of conferences and inviting scholars)*

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*(please submit the application to Ms. Winnie Lam, College Office, New Asia College)*

**1. Particulars of Applicant**

Name: \_\_\_\_\_ Department: \_\_\_\_\_

Post: \_\_\_\_\_ Telephone \_\_\_\_\_ E-mail: \_\_\_\_\_

Staff ID Number: \_\_\_\_\_ Date of Affiliation to NAC: \_\_\_\_\_

**2. a) Application for Conference Grant**

**Conference Information**

Name of Conference: \_\_\_\_\_

Date/Place of Conference: \_\_\_\_\_

Title of Paper to be presented: \_\_\_\_\_

Registration Fee: \_\_\_\_\_

Travelling Expenses: \_\_\_\_\_  
*(Accommodation expenses, per diem allowance and local travel within city will not be covered)*

Membership Fee<sup>#</sup>: \_\_\_\_\_

Total Cost: \_\_\_\_\_

**b) Application for Funding Support for Visiting Scholars**

**Visiting Scholar(s) Information**

Name: \_\_\_\_\_

Institution: \_\_\_\_\_ Post: \_\_\_\_\_

Date(s) of Visit: \_\_\_\_\_

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<sup>#</sup> The College will cover the membership fee only if the applicant is able to provide supporting documents showing that (1) the total amount is less than the original registration fee after joining the membership, or (2) the conference is only open for members.

Purpose of Visit: \_\_\_\_\_  
\_\_\_\_\_

3. Sponsorship applied for/obtained from other sources, e.g. conference grants from the University:  
(If not, please explain the reason of not applying for other funding/sponsorship)

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

4. **Information on funding support granted by CUHK/NAC in the past 12 calendar months:**

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

5. **Contribution to New Asia College:**  
(e.g. Committee work, GE courses, events/activities participated)

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Applicant)

6. **Department Chairperson's/School Director's comments:**

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

Signature: \_\_\_\_\_ Department/School: \_\_\_\_\_  
Chairperson/Director

Date: \_\_\_\_\_