THE UNIVERSITY OF HONG KONG LI KA SHING FACULTY OF MEDICINE

DEPARTMENT OF PATHOLOGY

Master of Molecular and Diagnostic Pathology (MMDPath)

Application for Admission as Occasional Students (Specific Courses or Sections within the MMDPath only)

The personal data provided in this form will be used for processing your application for enrolment on the relevant courses, by the administrative and academic departments concerned. If you wish to access or correct your personal data after submission of this form, please contact Ms Gigi Cheung of the Department of Pathology.

An attendance certificate will only be issued to students who have attended 75% of the teaching sessions of each of their chosen modules/courses.

Course fee: Standalone CME courses for occasional students:

Standalone Chill Courses for Occasional Students.				
Standalone 3-credit course	HK\$	7,830		
Standalone 6-credit course	HK\$	15,660		
Standalone 9-credit course	HK\$	23,490		

CME courses for occasional students attending specific sections of the Diagnostic Pathology Modules:

MMDP7004-1: Chemical Pathology	HK\$	7,200
MMDP7004-2: Diagnostic Haematology & Transfusion Medicine	HK\$	8,400
MMDP7010-1: Immunology	HK\$	6,500
MMDP7010-2: Renal Pathology Update & Transplant Related Pathology	HK\$	8,200

This form should be completed and returned to the Department of Pathology (Address: Room 019, 7/F, Block T, Queen Mary Hospital, Pokfulam Road, Hong Kong) together with a Hong Kong dollar cheque for the course fee, which must be crossed and made payable to "*The University of Hong Kong*" (Note: only cheque will be accepted). For enquiries, please contact Ms Gigi Cheung (Tel: 2255 2664; Fax: 2218 5213; Email: <u>mmdpath@hku.hk</u>).

Section A

1. PERSONAL INFORMATION

Dr/Mr/Mrs/Miss* (Please fill in your full name [surname first] in block letters, as in your H.K.I.D. Card/passport.)

	Name in Chinese c	characters (if any):
Address for correspondence:		
Fax No.:		
Tel. No.:(Home)	(Office)	(Mobile Phone)
For current Research Postgraduate an	nd Taught Postgraduate stud	ents only:
Date of first registration:	Programme:	U. No
Department:	Supervisor's Name:	
PRESENT OCCUPATION		
Position held and Department		Starting date
Name and address of organisation		
QUALIFICATIONS		

2.

3.

4. I wish to enrol in the following Course(s)*:
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4.	I wish to enrol in the following Course(s)*:				
	Molecular Pathology Modules				
	MMDP7001: Principles and Techniques of Molecular Pathology (9 credits)				
	MMDP7002: Clinical Applications of Molecular Testing (9 credits)				
	MMDP7003: Fundamentals of Genetic Testing for Hereditary Disorders (9 credits)				
	MMDP7007: Practical Course in Laboratory Methods (6 credits)				
	MMDP7009: Clinical Applications of Genetic Testing in Inherited Diseases and Genetic Counselling (9 credits)				
	MMDP7019: Applications of Emerging Technologies for Genetic Testing (9 credits)				
Diagnostic Pathology Modules					
	MMDP7004: Chemical Pathology, Immunology, Diagnostic Haematology and Transfusion Medicine (9 credits)				
	MMDP7005: Essential Anatomical Pathology of Epithelial Tumors (6 credits)				
	MMDP7015: Essential Anatomical Pathology of Non-epithelial Tumors (3 credits)				
	MMDP7008: Molecular Microbiology (3 credits)				
	MMDP7008: Molecular Microbiology (3 credits) MMDP7010: Renal Pathology, Immunology and Transplant Related Pathology (9 credits)				
	MMDP7011: Clinical Placement in Diagnostic Molecular Pathology (6 credits)				
	MMDP7012: Clinical Placement in Haematology (6 credits)				
	MMDP7013: Clinical Placement in Chemical Pathology (6 credits)				
	MMDP7014: Clinical Placement in Immunology (6 creidts)				
5.	I wish to enrol in the following Section(s)*:				
	MMDP7004-1: Chemical Pathology				
	MMDP7004-2: Diagnostic Haematology & Transfusion Medicine				
	MMDP7010-1: Immunology				
	MMDP7010-2: Renal Pathology Update & Transplant Related Pathology				
	* Please tick as appropriate.				
6.	Total Course(s)/Section(s) to be enrolled:				
7.	Total course fee for the selected Course(s)/Section(s):				
7.					
	Bank Name: Cheque No.: Amount: HK\$				
	Date: Applicant's Signature:				
	For current Research Postgraduate and Taught Postgraduate students only:				
	Date: Supervisor's Signature:				
Section					
	Academic Director/Course Co-ordinator of MMDPath				
10 :	Academic Director/Course Co-ordinator of MMDPath				
I approv	/e/do not approve* the application of this candidate for the study of the selected Course(s)/Section(s)*.				
Remark	S:				

Signature: _____

* Please delete	as appropriate
Jun 2025	

Date: _____