*Amended\_Aug 2024*

**THE UNIVERSITY OF HONG KONG**

**DEPARTMENT OF STATISTICS AND ACTUARIAL SCIENCE**

**STAT4767 Actuarial Science Internship**

**Registration Form**

Please return this form to the Department in person or by email at ugdoc@hku.hk, or by fax at 2858-9041 PRIOR to the start date of the internship. Late applications will NOT be accepted.

1. **PERSONAL PARTICULARS**

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| --- | --- | --- | --- | --- | --- | --- |
| Name: |  | ( |  | ) | University no.: |  |

 *In English In Chinese*

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| --- | --- | --- | --- |
| Programme: | Bachelor of Science in Actuarial Science | Year of study: | 1/2/3/4 |

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| --- | --- | --- | --- |
| Email: |  | Telephone: |  |

1. **INTERNSHIP INFORMATION**

|  |  |
| --- | --- |
| Company name: |  |

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| --- | --- |
| Address: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job position: |  | Internship period: |  | - |  |

 Job description: *(Please attach additional sheets if necessary)*

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 Your goals in this internship: *(Please attach additional sheets if necessary)*

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1. **CHECKLIST BEFORE SUBMISSION** *(please check each box accordingly)*

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| [ ]  Passed at least 24 credits of advanced level courses prescribed in the BSc(AC) syllabus, including STAT3901 Life Contingencies I before the start date of the internship |

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| [ ]  Completed year 2 study (4 semesters of study excluding summer semesters)  before the start date of the internship |
| [ ]  Attached contract / appointment letter / other forms of employment evidence |
| [ ]  Certified that I have already fulfilled the enrolment requirements, including but not limited to the course pre-requisites. I understand that the contrary will render the application unsuccessful or have the enrolment withdrawn. |
| [ ]  I confirmed that I did not use another internship to apply for STAT4767 this semester. |
| [ ]  I confirmed that this internship is not offered by CEDARS (STEM Internship Scheme). |

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

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| **FOR OFFICIAL USE** |
| Approved / Rejected by |  | Date: |  |

 *Course Co-ordinator*