

PART A Personal information

Transcript Request Form

Applicant should complete **PART A** and send it to your appropriate officer of institution from which the transcript is requested.

Applicant's Name: (English)	(<u>Chinese</u>)
Contact Phone:	
University/Institution Attended:	
Date of Attendance: From	to
Date of Award:	
PART B: Programme applied for admission	n at HKSYU
Master of Social Sciences in Play Therapy programme	
Department of Counselling and Psychology	
Hong Kong Shue Yan University	
10 Wai Tsui Crescent, Braemar Hill,	
North Point, Hong Kong	

Part C: To the officer responsible for issuing transcripts

The above applicant has applied for admission to Master of Social Sciences in Play Therapy (2024-25) at Hong Kong Shue Yan University. Please send an official transcript together with this form to the above-mentioned address (PART B)