

CHE APPLICATION FORM

Certified Hospitality Educator Workshop 8-11 June 2017



Admission of candidate is based on Plan A or Plan B requirements, details of which can be found in <u>www.polyu.edu.hk/htm/edp/che2017_Jun</u>. Please ensure that you meet all the requirements in either Plan A or Plan B. <u>Submit your resume together with this form.</u> Successful applicants will be informed individually.

PERSONAL DATA (Please type or print clearly.)

NAME (Prof / Dr / Mr / Mrs / Ms)

Mailing Address (for CHE materials delivery)						
21						
Phone	Fax					
()	()	email:				
ACADEMIC EXPERIENCE			Total number of years employed as a hospitality educator:			
PRESENT POSITION				To :		
Institution						
Address						
Address						
Phone	Fax					
()	()	email:	email:			
INDUSTRY EXPERIENCE			Total number of years employed in the hospitality industry:			
POSITION		Fı	om :	To :		
Company/Property						
4.11						
Address						
Phone	Fax					
()	()	email:				

FEE/PAYMENT

The full program fee for the CHE program is US\$1,400 (HK\$10,920). Please make cheque payable to 'The Hong Kong Polytechnic University'. Your cheque or credit card information must accompany this completed registration form. We will only bank-in your cheque or bill your credit card once your application has been confirmed to be successful. No refund after payment.

 Payment:
 Image: MasterCard

 A/C Name.:
 Signature:

A/C No.:

Expiry Date:

CERTIFICATION AGREEMENT

With this application, I am applying for candidacy status for the Certified Hospitality Educator (CHE) program and submitting **the requested documentation, which includes a current resume.** In submitting this application for the Certified Hospitality Educator program, I acknowledge that the information I have provided is accurate. I hereby give the American Hotel & Lodging Educational Institute (AHLEI) permission to make a thorough investigation of my past employment, education, and professional development activities, and I release from liability all persons and companies supplying such information. I indemnify all persons I have listed in this application against any liability which might result from such an investigation.

In addition, I further agree to hold AHLEI and its Certification Commission harmless from any and all liability in the event this application is rejected on the basis of the information furnished to AHLEI by me or third persons which would, in the judgment of AHLEI, make me ineligible for certification. I agree to accept the Certification Commission's decision as to my eligibility for this certification.

Signature:

Date:

Send this completed form together with a current resume to: EDP Secretariat, School of Hotel & Tourism Management, The Hong Kong Polytechnic University, 17 Science Museum Road, Tsimshatsui East, Kowloon, Hong Kong by email: <u>flora.ng-ps@polyu.edu.hk</u> or via fax: (852) 2356 1390 <u>on or before 28 April 2017</u>