**Research Student Attachment Programme (RSAP) - Outgoing
Departure Form**

Please complete **ALL PARTS** of the form and submit together with the required documents to the Graduate School at least 4 weeks before departure by email to [gs.attachment@polyu.edu.hk](file:///%5C%5CNSF-DEPT4.its.polyu.edu.hk%5CGS%5CStudent%20Development%5CStudent%20Activities%5CAttachment%20or%20Exchange%20Programme%5CResearch%20Student%20Attachment%20Programme%5C2022-23%20%281st%20Round%29%5CDraft%20guidelines%5CForms%20for%20Outgoing%20Students%5Cgs.attachment%40polyu.edu.hk), otherwise, the release of financial support will be delayed.

Incomplete application form with missing supporting documents or signatures will NOT be processed.

If you are concurrently awarded the PolyU PhD Scholars International Collaborative Research Fellowship (ICRF) for the same visit, you are only required to submit the RSAP Departure Form.

**Required supporting documents:**

[ ]  Copy of offer letter of RSAP (and [ ]  offer letter of ICRF, if applicable)

[ ]  Copy of flight itinerary (with your name, flight number, departure and arrival details)

[ ]  Screen capture of the Leave Management System of the approved leave of absence for the whole period

[ ]  Applicable to HKPFS Awardees only: RGC approval for academic leave over 90 days

**PART A. PARTICULARS**

|  |  |  |  |
| --- | --- | --- | --- |
| Student Name |  | Student ID |  |
| Approved Duration in Offer Letter *(in months)*  |  | End of Normal Study Period *(Academic year/Semester)* |  |
| Host Institution |  |
| Attachment Commencement Date at the Host in Person\* |  | Attachment Completion Date at the Host in Person\* |  |

*\* The attachment completion date* ***MUST NOT*** *exceed the normal study period.*

*\* If the actual attachment duration differs from the approved duration in the offer letter, additional approval from the chief supervisor is required in* ***Part F****.*

**PART B. FLIGHT DETAILS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Flight No.  | From | To | Departure Date | Arrival Date  |
| Outbound Flight |  |  |  |  |  |
|  |  |  |  |  |
| Inbound Flight\* |  |  |  |  |  |
|  |  |  |  |  |

\* *Student may purchase the inbound flight at a later stage, if needed.*

**PART C.** **REQUEST FOR RELEASE OF FINANCIAL SUPPORT**

|  |  |
| --- | --- |
| I request to release financial support for: | [ ]  75% of the subsistence allowance. |
| The remaining 25% of subsistence allowance and travel allowance will be reimbursed upon submission of a reimbursement form, boarding passes and completion report after completion of the attachment programme. |

**PART D. EMERGENCY CONTACT (family member preferred)**

|  |  |  |
| --- | --- | --- |
| Name | Relationship | Contact Number |
|  |  |  |

**PART E. DECLARATION**

[ ]  I undertake any possible risks involved in the programme and I declare that my parents/guardians have been informed about the details of my participation in the programme.

[ ]  I understand all terms and conditions as set in the [Group Travel Insurance](https://www.polyu.edu.hk/fo/internal/students/insurance-for-students/) provided by PolyU and the need of arranging additional travel and/or health insurance, whenever necessary.

[ ]  I undertake to return to PolyU to continue my study promptly after completing the programme.

[ ]  I shall inform the home supervisor, DoRPgS and GS in writing if the **attachment duration changes**. I confirm that in the event that the actual duration is shorter than the **minimum duration requirement of three months**, I shall refund the funding released as requested by GS.

[ ]  I understand my responsibility to submit a post-trip completion report upon completion of the programme.

Note: Student should obtain signatures in Part F and G before submitting the form to GS.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Name |  | Signature |  | Date |

**PART F. ENDORSEMENT BY POLYU CHIEF SUPERVISOR**

[ ]  Endorse.

[ ]  Not endorse.

|  |
| --- |
| *Additional approval due to deviation of attachment duration [If any]* |
| [ ]  Since the actual attachment duration **differs from the approved duration** in the notice letter, I approve the amendment of the attachment duration. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Name |  | Signature |  | Date |

 **PART G. ENDORSEMENT BY DIRECTOR OF RESEARCH POSTGRADUATE STUDIES (DoRPgS)**

[ ]  Endorse.

[ ]  Not endorse.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Name |  | Signature |  | Date |

Updated in Mar 2025