

**THE HONG KONG COLLEGE OF ORTHOPAEDIC SURGEONS**  
**Young Fellows Committee**  
**Travelling Sponsorship for Young Fellows**

**APPLICATION FORM**

**Personal Particulars**

Name: (English) \_\_\_\_\_ (Chinese) \_\_\_\_\_

Correspondence Address: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Proposed Event**

Name of Event: \_\_\_\_\_

\_\_\_\_\_  
*(Please enclose a preliminary programme)*

Location (City, Country): \_\_\_\_\_

Duration (Start Date to End Date): \_\_\_\_\_

**Declaration**

- I confirm that I am a Young Fellow (Age <40) on the day the applications close.
- I confirm that I will publish a written report on the HKCOS website within 30 days from the last date of the applied activity.
- I have not received or will not receive any sponsorship from any other organisation for the proposed event.
- I last received sponsorship from any organisation within 12 months prior to the closing date of application.  
Date of Event: \_\_\_\_\_ Sponsorship Organisation: \_\_\_\_\_
- By the closing date of application, I have served in Orthopaedics for \_\_\_\_\_ (integral number) completed years (Internship/Externship NOT counted). Please attach an updated CV.

**I understand that any dishonesty of false representation, both on this application form and in the information contained in my CV, will lead to disqualification.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Return Address:** Secretariat Office, The Hong Kong College of Orthopaedic Surgeons, Room 905, 9/F, Hong Kong Academy of Medicine Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong ☎ (852) 2871 8722