For office use					
Rec'd date:					
Result:	Approved	Disapproved			
Course code:	2024/25-SIC-				

THE UNIVERSITY OF HONG KONG FACULTY OF ENGINEERING Innovation Academy

Proposal for Student-initiated course (to be completed by the hosting team)

A. Course Details				
Title:				
Hosting Team:				
Contact person:				
Contact number:				
Email:				
Date:	From		То	
Time:				
Venue:				
	No			
Pre-requisite(s):	Yes Please specify:			
Course size:				
Composition of attendees:	Members of Innov	ation Wing	InnoHub members	
(please tick the appropriate)	Students of HKU E		Students of other facult	ties at HKU
	Others (Please spe	cify:)
No. of learning hours:				
Course Description: (Please provide a short paragraph. We will use it to promote the course.)				

Learning outcomes:	
Attendance Policy:	Attendees who attend not less than <u>80%</u> of the course and complete the coursework as required by the course can claim 1 credit from the "Credit Award Scheme for Out-of-classroom Learning Experiences" of the University (https://tl.hku.hk/out-of-class-credits/).
Evaluation Criteria:	

B. Proposed Course Schedule (Please insert additional rows, if necessary.)

(Please insert additional rows, if necessary.)					
Session	Date	Instructor(s)	Learning activities / Coursework		
1					
2					
3					
4					
5					

6		
7		
8		
9		
10		

C. Profile of the Student Instructor(s):							
		Na	ame	UID	Major	Contact No.	Email
Student	1						
Instructor(s):	2						
Please add extra	3						
row if needed.	4						
	5						
	Nai	me:					
Faculty Advisor	Em	ail:					
	Cor	ntact no.:					

D. Budget Proposal (Please provide a detailed budget proposal for the courses)				
Items	Breakdown (HK\$)			
Total:				

E. Submission checklist	
Items	?
Poster – preferably with dimensions of 36 inches (width) x 54 inches (height) with resolution of at least 150 dpi (5,400 x 8,100pixels)	
A 1-minute highlight video for promoting the course	

F. Declaration and Endorsement							
	☐ I understand that I need to apply for credit(s) for Out-of-classroom Learning Experience with HKU Horizons Office directly.						
		dge that should the Innovation Academ			nentation of the propose	d course, I shall timely	
		Student In	structor I	Representative	Supervisor /	Faculty Advisor	
Signature:							
Name:							
Date:							
	•						
				For office use			
	Appro	ved					
Rate of s	ITE OT SUNNOTT: I I W I			get proposal of the n and up to	HK\$		
Rema	rks:						
	Disapp	proved					
Reaso	n(s):						
Signature		Hea	ad of Inno	vation Academy	Date:		
		Faculty of Engineering, HKU					