**THE UNIVERSITY OF HONG KONG**
**FACULTY OF ENGINEERING**
**Innovation Academy**

**Student-Initiated Course**
**Course Report**
**(to be completed by the hosting team)**

| **A. Course Details** | |
|---|---|
| **Code:** | |
| **Title:** | |
| **Hosting Team:** | |
| **No. of participants:** | |

| **B. Course Report**<br>*(Please provide a formal project report write up. The report will be circulated to our donors, the Faculty community, and the wider public.)* | |
|---|---|
| **Intended Learning Outcomes** | |
| **Student learning and achievements** | |
| **Future plan** | |
| **Sharing by Faculty Advisor and his/her quotes** | |
| **Sharing by students, student's quotes** | |

| | |
|---|---|
| **Others** | |

**D. Reflection Report**

*(Reflection of the experience and the outcome in **500 words**, inclusive of what you have learnt, the difficulties encountered, the achievement of the intended outcome, the impact on your personal, professional and / or career development, etc.)*

**C. Budget Report**

| Items | Budget Approved | Actual Expenditure |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| **Total:** | | |

*Note: Expenses will be paid/re-imbursed upon presentation of valid invoices/receipts. The awardee will have 3 months within which to complete the necessary financial procedures upon project completion.*

| D. Submission checklist | |
|---|---|
| **Items** | ☐ |
| Attendees' Report | ☐ |
| Certified attendance list of participants | ☐ |
| A two-minute video | ☐ |
| 5 photos in print quality | ☐ |

| E. Declaration by Instructor | |
|---|---|
| ☐ I confirm the information given in this report is true and accurate.<br>☐ I understand that the content that shared in the report will be collected by the Innovation Academy and will be published in connection with a variety of activities including website community features or other promotion. | |
| **Signature** | |
| **Name:** | |
| **Date:** | |

| F. Endorsement by Faculty Advisor | |
|---|---|
| **Signature** | |
| **Name:** | |
| **Position:** | |
| **Department:** | |
| **Date:** | |

*Please submit the Course Report and the relevant documents to the Office of Innovation Academy* ***within one month*** *upon the completion of the course.*