The University of Hong Kong  
Centre of Development and Resources for Students  
Pre-registration Form for SEN Support

Personal Particulars:

Student Name: ___________________________  
University No.: __________________________

Faculty: _________________________________  
Programme: ______________________________

Status:  □ Local  □ Non-local  □ Exchange  
Study Mode:  □ Full-time  □ Part-time

Contact phone no.: ________________________  
Email address: ____________________________

Please indicate your reason(s) for appointment (choose more than one if applicable):

☐ Reasonable academic adjustments / accommodations
☐ Support service and resources
☐ Information and orientation
☐ Others: ____________________________________________________________

Please indicate the nature of your disability (choose more than one if applicable):

☐ Specific Learning Disability (e.g. Dyslexia)
☐ Attention-Deficit / Hyperactivity Disorder
☐ Autism Spectrum Disorder
☐ Developmental Coordination Disorder (e.g. Gross motor and/or fine motor problems, handwriting problems)
☐ Others: ____________________________________________________________

Please indicate the documentation you provide (choose more than one if applicable):

☐ Assessment report by qualified physician / psychiatrist / psychologist / physiotherapist / occupational therapist
☐ Letter from an organization (e.g. your school or university, public examination body) on the academic adjustments / accommodations received in the past
☐ Do not have documentation
☐ Others _________________________________

_____________________________________________________________________________

Please submit your completed form and documentation with attention to Ms. Ellen KAU,  
Student Advising Officer (Learning Support), CEDARS SEN Support via email or in person:

Email: cedars-SEN@hku.hk  
Tel. No.: 2857-8388  
Address: Room 408, Meng Wah Complex