**THE UNIVERSITY OF HONG KONG** 43/421

**APPLICATION FOR TESTIMONIAL**

This application form is applicable to students WITHOUT access to HKU Portal account. *(If you have just left the University and your HKU Portal account is still valid, please submit an online application form in SIS).*

**INSTRUCTIONS TO APPLICANTS**

Testimonial is an official document which certifies the qualification(s) awarded to you or the programme you are studying. It is usually used to attest student status for application of Immigration Arrangements for Non-local Graduates (IANG), job hunting and sitting public examinations (e.g. TOEFL). For non-local students applying for the extension of student visa, please contact the Admissions and Academic Liaison Section (AAL) (<https://www.studentvisa.hku.hk/>) for assistance in the first instance.

The University reserves the right to withhold issuance of testimonial to a student owing fees or any other debt to the University, or who has failed to discharge all obligations towards the University.

**SUBMITTING THE APPLICATION**

Completed application form, together with proof of fee payment where appropriate, should be submitted:

1. by mail or in person to the Academic Services Office, Room G-04, Run Run Shaw Building, The University of Hong Kong, Pokfulam Road, Hong Kong; or
2. by fax at (852) 2540 1405 (*for payment made by credit card or internet banking only*); or
3. by email (*for payment made by credit card or internet banking only*).

Please send the completed application in **PDF** format by email to <asoffice@hku.hk>. Please indicate your name, type of application and the Faculty of your latest study in the e-mail subject (e.g. CHAN Tai Man\_Testimonial\_Faculty of Arts).

A photocopy of the applicant’s HKID Card/Passport MUST be attached to the application form. All documents will be destroyed after processing of the application.

**PROCESSING TIME**

Testimonial(s) may be collected from the Academic Services Office direct and/or be dispatched by ordinary mail or registered post as indicated on the application form. The normal processing time is **10** working days (excluding Saturday, Sunday and public holidays).

Testimonials for fresh graduates will require a longer processing time to include the class of honours or qualification attained, if applicable. Students are responsible for ensuring that their overall results have been formally announced before submitting an application for testimonial to the Academic Services Office. For students graduated in or before 1993, a longer processing time may be required as most of the records have to be re-constructed into computerized format.

**COLLECTION METHODS**

You will be informed by e-mail when the testimonial(s) is/are ready.

Testimonial(s) to be collected in person or by an authorized person

Testimonials can be collected in person or by an authorized person at the Academic Services Office (Room G-04, G/F, Run Run Shaw Building). If another person is authorized to collect testimonial(s) on behalf of the applicant, the full name and the HKID Card/Passport number of the authorized person must be clearly stated on the application form. The applicant/the authorized person will be required to show his/her HKID Card/Passport for verification when collecting the testimonial(s). Testimonials not collected within three months from the date of issue (which is printed on the testimonial) will be destroyed by the Academic Services Office for security reason.

Testimonial(s) to be sent by mail

Testimonials will be sent by ordinary mail or registered post as indicated on the application form. If you wish to know more about the two types of mail services, you may visit the Hong Kong Post website:

<https://www.hongkongpost.hk/en/home/index.html>

For overseas addresses, registered post will be sent by regular air mail or surface mail depending on the availability of mail delivery services via Hong Kong Post. You may check the Hong Kong Post website at

<https://www.hongkongpost.hk/en/about_us/whats_new/notices/index.html> for the latest update.

Please allow extra mailing time for the testimonial(s) to be sent by post. Longer mailing time is required for overseas addresses (especially to the United States and Canada); and/or during peak seasons in January/February and in July/August. **The University accepts no responsibility for any loss or damage to the documents during postal delivery**. To avoid postal error, applicants must give clear and complete addresses of the recipients of the testimonials on the application form.

If no instruction is given on the application form, the testimonial(s) will be put in one single envelope. If the testimonials are to be packed in individual envelopes, the front of each envelope will be printed "TO WHOM IT MAY CONCERN".

Please state your instructions clearly as request for alternative arrangement will NOT be accepted once the application form is received.

If you are in urgent need of the testimonial(s), please consider collecting the document(s) at the Academic Services Office. In case you have any questions, please send email to asoffice@hku.hk.

**APPLICATION FEES AND PAYMENT METHODS**

HK$30 per copy (inclusive of postage by ordinary mail). For document(s) to be sent by registered post, an additional $20 will be charged per mailing address. All fees paid are NOT refundable.

Please pay the application fee by

1. using one of the methods below; or
2. credit card (**it must be your own credit card**); or
3. a bank draft *(in Hong Kong Dollars)* drawn on a bank in Hong Kong and made payable to “*The University of Hong Kong*”.

If you are using the payment methods in (a) above, it is essential that the original ATM customer advice, or in the case of internet banking, a printed copy of the bank’s acknowledgement statement which contains the payment reference number, be stapled to your application form for submission to the University. Please retain a photocopy of the receipt as proof of fee payment.

Methods of Payment

|  |  |  |
| --- | --- | --- |
| ***Payment method*** | ***Procedures*** | ***Receipt to be attached to the application form*** |
| ATM(Automatic Teller Machine) | 1) Locate an ATM with ‘Bill Payment’ function2) Select “Bill Payment”🡺“Education”🡺“The University of Hong Kong” ***(Please do not use the account transfer function for payment)***3) Enter Bill Type: "06" Other Fees4) Enter 14-digit Bill Account Number: “Your University Number (10 digits)” plus a 4-digit suffix “4002” (If you have forgotten your University Number, please use “2099999983” in lieu)5) Enter the *appropriate* amount payable | Original ATM customer advice |
| Internet banking | 1) Logon to any of the following websites: HSBC <http://www.hsbc.com.hk> Hang Seng Bank <http://www.hangseng.com> JETCO <http://www.jetco.com.hk> BEA <http://www.hkbea.com>2) Make bill payment by choosing the following function: ***(Please do not use the account transfer function for payment)*** HSBC: View and Pay Bills Hang Seng Bank: View and Pay Bills JETCO: JET Payment BEA: Bill Payment / CyberPayment / JET Payment3) Select “The University of Hong Kong” as the merchant for payment4) Enter Bill Type: “06” Other Fees5) Enter 14-digit Bill Account Number: “Your University Number (10 digits)” plus a 4-digit suffix “4002” (If you have forgotten your University Number, please use "2099999983" in lieu)6) Enter the *appropriate* amount payable | A printed copy of the bank’s acknowledgement statement which contains the payment reference number |

**PERSONAL INFORMATION COLLECTION STATEMENT**

Available at <http://www.ase.hku.hk/doc/PICS_159_716.pdf>.

Academic Services Office

Address: Room G-04 Ground Floor, Run Run Shaw Building, The University of Hong Kong

Office Hours: Monday – Friday: 9.00 a.m. – 5.30 p.m. Saturday: 9.00 a.m. – 12.30 p.m.

Closed on Sundays, Public Holidays and University Holidays (*i.e.* Christmas Eve, New Year’s Eve (p.m.), The day preceding Lunar New Year (p.m.) and Foundation Day (March 16)).

Tel: 2859 2433 Fax: 2540 1405 Email: asoffice@hku.hk

**The University of Hong Kong** 43/421

**Application for Testimonial**

|  |
| --- |
| **Section A Personal Particulars** |
| University number: |  | E-mail address: |  |
| Name in English (block letters, surname first): |  |
| Name in Chinese (if applicable): |  |
| Date of Birth (DD/MM/YYYY): |  | HKID/Passport number: |  |
| Contact numbers:  | (Mobile) |  |  (Home) |  |
| Correspondence Address: |  |
|  |  |
| Programmes attended(*e.g. BSc, Exchange–BA, MPhil*)*In chronological order* | Faculty | Date of attendance |
| From | To |
| (mm/yyyy) | (mm/yyyy) |
| 1.  |  |  |  |
| 2.  |  |  |  |

# Section B Application Fees and Payment Methods (see Notes on Application Fees and Payment Methods)

|  |  |
| --- | --- |
| Application Fee: HK$30 Per Copy  | ^ For Registered Post, an additional HK$20 will charged per mailing address *(e.g. if you apply for 2 copies to be sent to one single address by Registered Post, the total fees are HK$80)* |
| Collection Method: | No. of Copies |  | No. of Addresses | Fees |
| 1. In Person
 |  | x $30per copy | **+** |  |  |  |
| 1. By Registered Post ^
 |  | x $30per copy |  | x $20per address |  |
| 1. By Ordinary Mail
 |  | x $30per copy |  |  |
| Total no. of copies: |  |  | Total Fees: |  |

*(Please √ one box only.)*

🞏 The **original** ATM customer advice\* / a printed copy of the internet banking acknowledgement statement\* showing a total payable amount of HK$ \_\_\_\_\_\_\_\_ is attached as evidence of payment. *(\* Please delete as appropriate.)*

🞏 A Hong Kong dollar bank draft showing a total payable amount of HK$ \_\_\_\_\_\_\_\_\_ which is made payable to “THE UNIVERSITY OF HONG KONG” is attached.

🞏 Credit card **(It must be your own credit card)**

I authorize The University of Hong Kong to charge HK$ to **MY** credit card account below:

|  |  |
| --- | --- |
| 1. Credit card *(Please √)* | □ Visa □ Master |
| 2. Card number  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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 |
| 3. Expiry date (month/year) |

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| --- | --- | --- | --- | --- | --- |
|  |  | / |  |  | *\*Expiry date not less than 6 months from date of application\** |

 |
| 4. Your name printed on credit card (in BLOCK LETTERS) |  |
| 5. Signature of cardholder | *(Please sign, do not type)* |

**Section C Purpose of Application**

[ ] Immigration Arrangements for Non-local Graduates (IANG)/ Overall Results Required (A longer processing time may be required)

[ ] To certify the Medium of Instruction of the University

[ ] Others (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | University number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  Page 2 of 4 |

# Section D Collection Methods

|  |  |
| --- | --- |
| [ ] In Person | [ ] By an Authorized Person Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HKID card/ Passport no. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Pack the testimonials in1 [ ] ONE single University envelope[ ] individual University envelopes | With attachment 2 [ ] YES [ ] NO (please send us the attachment with this application form) |

**(b) By Registered Post** Please provide full mailing address(es) below and complete the address label(s) on page 3.

If address labels provided are insufficient, please attach supplementary mailing list.

|  |  |
| --- | --- |
| Address 1 **(By Registered Post)**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Number of copies to this address: \_\_\_\_\_\_Pack the testimonials in1 [ ] ONE single University envelope [ ] individual University envelopesWith attachment 2 [ ] YES [ ] NO (please send us the attachment with this application form) |
| Address 2 **(By Registered Post)**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Number of copies to this address: \_\_\_\_\_\_Pack the testimonials in1 [ ] ONE single University envelope [ ] individual University envelopesWith attachment 2 [ ] YES [ ] NO  |

**(c) By Ordinary Mail** Please provide full mailing address(es) below and complete the address label(s) on page 4.

If address labels provided are insufficient, please attach supplementary mailing list.

|  |  |
| --- | --- |
| Address 1 **(By Ordinary Mail)**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Number of copies to this address: \_\_\_\_\_\_Pack the testimonials in1 [ ] ONE single University envelope [ ] individual University envelopesWith attachment 2 [ ] YES [ ] NO (please send us the attachment with this application form) |
| Address 2 **(By Ordinary Mail)**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Number of copies to this address: \_\_\_\_\_\_Pack the testimonials in1 [ ] ONE single University envelope [ ] individual University envelopesWith attachment 2 [ ] YES [ ] NO  |

1 If you apply for more than one testimonial, please indicate your preference. If no indication, ONE single envelope will be provided.

2 If the testimonial is to be sent with a“Request for testimonial” form provided by some institutions, please enclose the request form with this application form. Documents other than the “Request for testimonial” form will not be accepted.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of Applicant:** *(Please sign, do not type.)* |  |  Date: |  |

- End of Testimonial Application -

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**To be completed by the applicant / an authorized person upon collection of testimonial(s)**

Collected by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature) Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- |
| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | University number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Page 3 of 4 |

**Address Labels (Testimonial)**

**(By Registered Post)**

|  |  |
| --- | --- |
| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country:  | **Address 1 (By Registered Post)****Number of copies to this address: \_\_\_\_\_\_** |

|  |  |
| --- | --- |
| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country:  | **Address 2 (By Registered Post)****Number of copies to this address: \_\_\_\_\_\_** |

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| --- | --- | --- |
| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | University number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Page 4 of 4 |

**Address Labels (Testimonial)**

**(By Ordinary Mail)**

|  |  |
| --- | --- |
| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country:  | **Address 1 (By Ordinary Mail)****Number of copies to this address: \_\_\_\_\_\_** |

|  |  |
| --- | --- |
| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country:  | **Address 2 (By Ordinary Mail)****Number of copies to this address: \_\_\_\_\_\_** |