



香港學術及職業資歷評審局  
Hong Kong Council for Accreditation of  
Academic & Vocational Qualifications

## **Application Form for Substantial Change**

### **Notes to Operator or Assessment Agency:**

1. Please read the *Guidance Notes on Substantial Change to Accreditation Status* before completing the application form.
2. Prior to submitting an application to HKCAAVQ, an operator or assessment agency are expected to consider the extent of the proposed change(s) and obtain approval according to its internal quality assurance arrangements.
3. The responsibility for providing sufficient information and rationale to substantiate the proposed change(s) rests with the operator or assessment agency. The operator or assessment agency may be required to provide additional information, if needed.
4. The proposed changes should not be implemented without the written approval from HKCAAVQ.
5. Completed application form and supporting documents should be submitted via the e-Portal (<https://eportal.hkcaavq.edu.hk/>).
6. Acknowledgement will be provided by HKCAAVQ upon the receipt of the application.

### **Part I Details of the Operator / Assessment Agency**

Name in English	
Name in Chinese	

### **Part II Proposed Substantial Change(s)**

**(a) The proposed change(s) is related to the following accreditation status:**

(Please check appropriate box(es) with "☑".)

- ☐ Initial Evaluation
- ☐ Learning Programme Accreditation
- ☐ Programme Area Accreditation
- ☐ Institutional Review
- ☐ Assessment Agency

**(b) For proposed change(s) related to learning programme(s), please complete the following table:**

Programme Title in English	
Programme Title in Chinese	
Approved Validity Period	

**(c) The proposed substantial change(s) relates to the following area(s):**

(Please check appropriate box(es) with “☑”. Examples of substantial changes are listed in the *Guidance Notes on Substantial Change to Accreditation Status* available on HKCAAVQ website at <http://www.hkcaavq.edu.hk>.)

Institutional Level	Programme Level
<input type="checkbox"/> Institutional Status, Direction and Mission	<input type="checkbox"/> Programme Objective and Learning Outcomes
<input type="checkbox"/> Governance, Institutional Structure and Management	<input type="checkbox"/> Programme Content and Structure
<input type="checkbox"/> Strategic or Academic Plan	<input type="checkbox"/> Admission Requirements and Student Selection
<input type="checkbox"/> Student Admission	<input type="checkbox"/> Teaching and Learning
<input type="checkbox"/> Staffing and Staff Development	<input type="checkbox"/> Student Assessment
<input type="checkbox"/> Financial and Physical Resources	<input type="checkbox"/> Staffing and Staff Development for Learning Programmes
<input type="checkbox"/> Quality Assurance (including Programme Approval, Monitoring and Review)	<input type="checkbox"/> Financial and Physical Resources for Learning Programmes (e.g. campus site(s) or teaching venue(s))
<input type="checkbox"/> Student Services and Student Records	<input type="checkbox"/> Quality Assurance (including Programme Development and Management)
<input type="checkbox"/> Management of Assessment Process and Criteria for Conduct of Assessment Tests (for Assessment Agency)	<input type="checkbox"/> Workplace Attachment and Student Support Services
<input type="checkbox"/> The Units of Competency (UoC) clusters (for Assessment Agency)	<input type="checkbox"/> Student Records and Information Management
<input type="checkbox"/> Others: (please specify) _____	<input type="checkbox"/> Others: (please specify) _____

**(d) Full details of the proposed change(s)**

Proposed change(s)	From	
	To	
Proposed date of the change(s)		

(i) *Description of the impact of the proposed change(s) on the operator, assessment agency or learning programme.*

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(ii) *Rationales and/or reasons for the proposed change(s).*

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(iii) *Brief report of review process including a summary of comments / views from the relevant Board(s)/ Committee(s), advisor(s), External Examiner(s) as appropriate. Please include relevant documentary evidence, e.g. meeting minutes.*

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(iv) Other relevant information / documents substantiating the proposed change(s)\*.

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\* Should the substantial change involve any of the following aspects, please attach suggested possible supporting evidence:

- **Programme structure:** Current and proposed curriculum of the programme, etc.
- **Maximum number of new students for the programme:** the number of students admitted for the past two years (if any), staff deployment, capacity of teaching venue and student support, etc.
- **Teaching venue:** A list of facilities and capacity of teaching venue, etc.

### **Part III Contact Information**

<i>Executive head or an authorised person of the Operator/ Assessment Agency</i>	<i>Other contact person (e.g. Programme Leader/ Co-ordinator)</i>
Name:	Name:
Title (e.g. Mr, Ms, Dr):	Title (e.g. Mr, Ms, Dr):
Position:	Position:
Contact Phone No.:	Contact Phone No.:
Email:	Email:
Contact address:	Contact address:

### **Part IV Declaration**

I confirm and declare that:

- (a) The information provided in this application form is true and accurate.
- (b) I have read and fully understood all the information required to be submitted for the purpose of substantial change and the procedures described in the *Guidance Notes on Substantial Change to Accreditation Status*.
- (c) I am responsible for the strict compliance with all the relevant and applicable laws of the Hong Kong Special Administrative Region and have obtained the necessary prior approvals and registrations.

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Signature

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Name in block letter

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Designation  
(Executive head or an authorised person of the  
Operator/Assessment Agency)

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Date

**For non-local programmes, please also include the signature of the non-local operator.**

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Signature

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Name in block letter

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Designation  
(Executive head or an authorised person of the  
Operator)

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Date