

# 提名表格 NOMINATION FORM

在填寫提名表格前，請閱讀以下注意事項 Please read the following notes before filling out the nomination form.

## 1. LANGUAGE

The nomination form must be completed in either Chinese or English. *If the nomination is made in English, a Chinese translation of Section Two – Part E “Summary of Major Achievements” and Section Three – Part A/B (II) “Reasons for Nomination” must be provided.*

## 2. SUBMISSION METHOD

The completed nomination form together with the relevant supporting documents (including the nominee’s resume in both Chinese and English and copies of credentials) must be submitted to the Award Secretariat via email and by mail before the deadline on or before **30 June 2025 (Monday)**. Documents sent by mail will be considered based on the date marked by the postal stamp, and any late submissions will not be considered.

### STEP ONE: SUBMIT THE E-COPIES

- The nomination form and resume in both Chinese and English must be saved as MS WORD files.
- Copies of all the credentials (including but not limited to certificates/ appointment letters/ award certificates, etc.) must be combined into one PDF file.
- Please email the above files to the Award Secretariat at [scm@hkbu.edu.hk](mailto:scm@hkbu.edu.hk).

### STEP TWO: SUBMIT THE HARD COPIES

- If the nomination is made by an academic institution, the nomination form must **bear the signature of the head of the institution and the organisation chop**.
- If the nomination is made by scholars or by adjudicators/ previous awardees, the nomination form must bear signature of all the nominator(s).
- Please submit (i) the original nomination form, (ii) nominee’s resume in both Chinese and English and (iii) copies of all the credentials (no binding required) to the Award Secretariat by post or courier.

## 3. DOCUMENT HANDLING

Please do not send original proof of credentials. All nomination documents submitted will not be returned.

## 4. CONFIDENTIALITY

All information submitted will be kept in strict confidence and will only be used by HKBU School of Chinese Medicine and the Panel of Adjudicators for the purpose of selection for the Award recipients. Personal data will be handled in accordance with the Privacy Policy Statement and Personal Information Collection Statement of HKBU.

## 1. 填寫語言

請用中文或英文填寫本提名表格。若以英文填寫，必須提供第二部份 E 項「主要成就摘要」及第三部份 A 或 B 部 II 項「提名原因」的中文翻譯。

## 2. 遞交方式

本提名表格及有關文件（包括候選人的中英文履歷和資歷證明文件副本），須在截止日期 **2025 年 6 月 30 日（星期一）** 或之前，以電郵和郵遞方式交至獎項秘書處。郵寄遞交的文件以郵戳上的日期為準，逾期提交的文件將不獲考慮。

### 第一步：遞交電子版本

- 提名表格和中英文履歷須以 MS WORD 檔案儲存。
- 資歷證明文件副本（包括但不限於證書／委任信／獎狀等）須合併為一個 PDF 檔案儲存。
- 請將以上文檔電郵至獎項秘書處 ([scm@hkbu.edu.hk](mailto:scm@hkbu.edu.hk))。

### 第二步：遞交提名表格正本和資歷證明文件副本

- 如由學術機構提名，提名表格須具**機構最高首長簽名和機構印章**。
- 如由學者聯合提名或由評審委員／歷屆得獎人提名，提名表格須具所有提名人簽名。
- 請將 (i) 提名表格正本、(ii) 候選人的中英文履歷，以及 (iii) 資歷證明文件副本（無需釘裝）以郵寄或專遞方式送交至獎項秘書處。

## 3. 文件處理

請勿遞交資歷證明文件的正本。所有提交的文件概不發還。

## 4. 資料保密

所有提交的資料將絕對保密，並只供香港浸會大學中醫藥學院及評審委員會用作甄選貢獻獎得獎人之用。有關個人資料將根據香港浸會大學的《私隱政策聲明及收集個人資料聲明》處理。

# 提名表格 NOMINATION FORM

## 第一部份 SECTION ONE

候選人 Nominee	
候選人姓名 Nominee's Name	
工作機構/所屬單位 Name of Institution / Work Affiliation	
提名人／提名機構 Nominator/Nominating Organisation	
請剔選以下其中一項類別 Please tick ✓ one of the following categories:	
	提名類別 Nominator/ Nominating Organisation's Name
<input type="checkbox"/>	<b>機構提名*</b> <b>Nomination by Organisation*</b>
	<p>* 註：</p> <ul style="list-style-type: none"> <li>● 中國內地的候選人必須由大學／研究院／研究所等學術機構、中國省部級以上相關部門或學會提名；</li> <li>● 香港、澳門、台灣及海外候選人必須由大學或研究院／研究所等學術機構提名。</li> <li>● 每個機構／單位最多可提名三位候選人。</li> </ul> <p>* Remark:</p> <ul style="list-style-type: none"> <li>● Candidates from Mainland China shall be nominated by academic institutions, such as universities and research institutes, OR relevant departments/councils or academic societies at or above the provincial/ministerial level in Mainland China;</li> <li>● Candidates from Hong Kong, Macao, Taiwan and overseas shall be nominated by academic institutions, such as universities and research institutes.</li> <li>● Each organisation may nominate up to three candidates for the Award.</li> </ul>
<input type="checkbox"/>	<b>學者提名 Nomination By Scholars</b> 候選人必須獲得相關領域中最少三名正教授（或同等職級）的學者聯合提名。 The nomination must be jointly made by at least three full professors (or scholars of equivalent rank) in relevant fields.
<input type="checkbox"/>	<b>現屆評審委員／歷屆得獎人提名</b> <b>Nomination By Current Adjudicator / Previous Awardee</b>

### 收集個人資料聲明 Personal Information Collection Statement

香港浸會大學中醫藥學院根據大學的《私隱政策聲明和收集個人資料聲明》(<https://bupdp.hkbu.edu.hk/policies-and-procedures/pps-pics/>) 收集及處理個人資料。此表格中提供的個人資料僅用於「張安德中醫藥國際貢獻獎」及其相關目的。如欲查閱及／或要求更正經此表格所提交的個人資料，請以電郵方式（scm@hkbu.edu.hk）聯繫獎項秘書處。

The School of Chinese Medicine at Hong Kong Baptist University collects and handles personal data in accordance with the University's Privacy Policy Statement and Personal Information Collection Statement (<https://bupdp.hkbu.edu.hk/policies-and-procedures/pps-pics/>). All the personal data provided in this form will only be used for the purpose of the Cheung On Tak International Award for Outstanding Contribution to Chinese Medicine and related purposes. For access to and/or request for correction of the personal data submitted via this form, please contact the Award Secretariat by email (scm@hkbu.edu.hk).

## 第二部份 SECTION TWO

(由候選人填寫 To be completed by the Nominee)

### A. 候選人資料 NOMINEE INFORMATION

個人資料	PERSONAL PARTICULARS	
姓名 Name:	(中文 Chinese) _____	
	(姓 Last Name)	(名 Given Names)
	(英文 English) _____	
	(姓 Last Name)	(名 Given Names)
稱謂 Title:	院士/ 教授/ 博士* 性別 Fellow / Prof / Dr * Sex: _____	出生年份 Year of Birth: _____
國籍 Nationality:	原屬國家 Country of Origin: _____	
工作機構/所屬單位 Name of Institution / Work Affiliation:	(中文 Chinese) _____	
	(英文 English) _____	
職銜 Position:	個人網頁 (如有) Personal Website (if any): _____	
通訊地址 Correspondence Address:	(中文 Chinese) _____	
	(英文 English) _____	
聯絡電話 Contact Phone:	(辦公室 Office) _____	(手機 Cell Phone) _____
電郵 Email:	傳真號碼 Fax: _____	_____

聯絡人資料	CONTACT PERSON INFORMATION	
姓名 Name:	_____	
工作機構/ 所屬單位 Name of Institution / Work Affiliation:	_____	
職銜 Position:	_____	
聯絡電話 Contact Phone:	(辦公室 Office) _____	(手機 Cell Phone) _____
電郵 Email:	傳真號碼 Fax: _____	_____

\* 請刪去不適用者 Please delete as appropriate

## B. 學歷與專業資格 ACADEMIC & PROFESSIONAL QUALIFICATIONS

**學歷 Academic Qualifications:** (請按頒授日期順序列出 Please provide information in chronological order)

院校名稱 Name of Institution	獲取學歷 Qualification Attained	主修科目 Major	頒授日期 Conferment Date (DD/MM/YY)

**專業資格 Professional Qualifications:** (請按頒授日期順序列出 Please provide information in chronological order)

機構名稱 Name of Academy / Association / Professional Institution	專業資格 Professional Qualification	專業資格簡稱 Qualification Abbreviation	頒授日期 Conferment Date (DD/MM/YY)

## C. 研究範疇 RESEARCH AREAS

專業領域與研究專長 Professional Expertise and Research Specialties.

## D. 主要成就 MAJOR ACHIEVEMENTS

推動中醫藥國際化或在中醫藥研究領域取得具突破性及獲國際認可的成就。A description of the groundbreaking achievements in advancing the internationalisation of Chinese medicine, or breakthrough and internationally recognised achievements in Chinese medicine research.

## E. 主要成就摘要 SUMMARY OF MAJOR ACHIEVEMENTS

請以不超過 600 字概述 D 項所述的主要成就。Please give a summary of the major achievements set out in Part D above in no more than 600 words. **(FOR A NOMINATION MADE IN ENGLISH, A CHINESE TRANSLATION OF THIS SUMMARY MUST BE PROVIDED)**

## F. 其他資料 OTHER INFORMATION

請提供其他與獎項提名相關的資料（如適用）Please provide any other information relevant to the nomination (if deemed necessary)

## G. 聲明 DECLARATION

1. 本人謹此聲明，就本人所知，此提名表格內所填報的資料及所附文件中的資料屬正確無誤。  
I hereby declare that the information provided in this nomination form and the submitted documents is accurate to the best of my knowledge.
2. 本人明白在此表格上所填報之資料，評審委員會及其他特邀專家學者將用作甄選得獎人之用，以及方便獎項秘書處與本人聯絡。  
I understand that the information provided in this form will be used by the Panel of Adjudicators and invited scholars and experts for the purpose of selecting the Award recipient, and for further contact by the Award Secretariat.
3. 本人同意遵守貢獻獎的規則及此表格內所列的規定，並明白假如本人的提名文件並未依照表格內所列明的規定填報及提交，或提供的資料錯誤、失實或不全，本人的提名將可能被作廢。  
I agree to abide by the Award regulations and the rules stipulated in this nomination form. I understand that my nomination may be disqualified if it does not comply with the said rules or any of the information provided for this nomination is false, inaccurate or incomplete.
4. 本人願意應獎項秘書處的要求（如有需要）提供進一步資料、身份及／或資歷證明的正本，以供甄選得獎人之用。  
I am prepared to provide further information, proof of identity and/or credentials for the purpose of selection of the Award recipients if and when requested by the Award Secretariat.
5. 如本人獲頒貢獻獎，本人承諾會參加由香港浸會大學及其中醫藥學院，以及其授權的機構或代理人所舉辦的頒獎典禮、訪問及相關教育活動。  
In the event that I am selected as an awardee, I undertake to attend the award presentation ceremony, interviews and related educational activities organised by Hong Kong Baptist University and its School of Chinese Medicine, and any organisation or agent authorised by the University and the School.
6. 如本人獲獎，本人同意香港浸會大學及其中醫藥學院使用、分發、發布、印製及／或複製列載於此表格，以及由於是次提名所收集到有關本人的資料，作獎項宣傳或公示監督之用。  
In the event that I am selected as an awardee, I hereby give permission to Hong Kong Baptist University and its School of Chinese Medicine to use, distribute, promulgate, print and/or duplicate the information provided in this nomination form, and any other information pertaining to me collected as a result of this nomination, for publicity of the Award or public scrutiny purposes.
7. 本人已閱讀及明白此表格的收集個人資料聲明。  
I have read and understood the Personal Information Collection Statement of this nomination form.

候選人姓名 Name of Nominee

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簽署 Signature

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日期 Date

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### 第三部份 SECTION THREE

#### 提名入／機構資料 NOMINATOR/NOMINATING ORGANISATION'S PARTICULARS

(由提名入／機構填寫 To be completed by the Nominator/ Nominating Organisation)

如由大學或研究院等學術機構、中國省部級以上相關部門或學會提名 Nomination by academic institutions such as universities and research institutes, OR relevant departments/councils or academic societies at or above the provincial/ministerial level in Mainland China.	請只填寫 A 部 Please complete Part A only.
如由學者提名，候選人必須獲得與其相關領域中 <u>最少三名</u> 正教授職級（或同等職級）的學者聯合提名 Nomination must be jointly made by <u>at least three</u> full professors (or scholars of equivalent rank) in relevant fields.	請只填寫 B 部 Please complete Part B only.
如由評審委員或歷屆得獎人提名，每位評審委員／歷屆得獎人最多可提名 <u>一位</u> 候選人。 Each adjudicator/ previous awardee shall nominate up to <u>one</u> candidate for the Award.	

#### A部 Part A

#### I. 提名機構資料 PARTICULARS OF THE NOMINATING ORGANISATION

機構名稱 Name of Organisation:	(中文 Chinese)		
	(英文 English)		
機構首長姓名 Head of Organisation:	(中文 Chinese)		
	(英文 English)		
	(姓 Last Name)	(名 Given Names)	
稱謂 Title:	院士 / 教授 / 博士 / 先生 / 女士 / 小姐 Fellow / Professor / Dr / Mr / Mrs / Ms / Miss *	職銜 Position:	
與候選人關係 Relationship with Nominee:		機構網址 Website:	

#### 聯絡人資料 CONTACT PERSON INFORMATION

姓名 Name:		職銜 Position:	
通訊地址 Correspondence Address:	(中文 Chinese)		
	(英文 English)		
聯絡電話 Contact Phone:	(辦公室 Office)	(手機 Cell Phone)	
電郵 Email:		傳真號碼 Fax:	

\* 請刪去不適用者 Please delete as appropriate

## II. 提名原因 REASONS FOR NOMINATION

請以不超過600字簡述提名原因，內容必須列舉候選人所具備的條件。Please state the reasons for nomination by addressing the selection criteria in no more than 600 words. **(FOR A NOMINATION MADE IN ENGLISH, A CHINESE TRANSLATION OF THIS SUMMARY MUST BE PROVIDED)**

## III. 提名機構聲明 Nominating Organisation's Declaration

1. 本機構謹此聲明，就本機構所知，此提名表格內所填報的資料及所附文件中的資料屬正確無誤。  
We hereby declare that the information provided in this nomination form and the submitted documents is accurate to the best of our knowledge.
2. 本機構明白在此表格上所填報之資料，評審委員會及其他特邀專家學者將用作甄選得獎人之用。  
We understand that the information provided in this form will be used by the Panel of Adjudicators and invited scholars and experts for the purpose of selecting the Award recipient.
3. 本機構同意遵守貢獻獎的規則及此表格內所列的規定，並明白假如本機構的提名文件並未依照表格內所列明的規定填報及提交，或提供的資料錯誤、失實或不全，本機構的提名將可能被作廢。  
We agree to abide by the Award regulations and the rules stipulated in this nomination form. We understand that the nomination may be disqualified if it does not comply with the said rules or any of the information provided for this nomination is false, inaccurate or incomplete.
4. 本機構願意應獎項秘書處的要求 (如有需要) 提供進一步資料，以供甄選得獎人之用。  
We are prepared to provide further information for the purpose of selection of the Award recipients if and when requested by the Award Secretariat
5. 如候選人獲獎，本機構同意香港浸會大學及其中醫藥學院使用、分發、發布、印製及／或複製列載於此表格，以及由於是次提名所收集到的相關資料，作獎項宣傳或公示監督之用。  
In the event that the nominee is selected as an awardee, we hereby give permission to Hong Kong Baptist University and its School of Chinese Medicine to use, distribute, promulgate, print and/or duplicate the information provided in this nomination form, and any other information collected as a result of this nomination, for publicity of the Award or public scrutiny purposes.
6. 本機構已閱讀及明白此表格的收集個人資料聲明。  
We have read and understood the Personal Information Collection Statement of this nomination form.



#### IV. 提名機構簽署及蓋印 Signature of Nominating Organisation and Chop

機構名稱 Name of Organisation:

機構首長姓名 Name of Head of Organisation:

職銜 Position:

簽署及機構印章 Organisation Chop

--

日期 Date: \_\_\_\_\_

※此表格必須由提名機構首長簽署及蓋印核實，否則將不獲處理。

This form must be signed and stamped by the head of the nominating organisation for verification, otherwise it will not be processed.



## B 部 Part B

### 學者／評審委員／歷屆得獎人提名

### NOMINATION BY SCHOLARS/ ADJUDICATORS/ PREVIOUS AWARDEES

- ☐ 如由學者提名，候選人必須獲得與其相關領域中最少三名正教授職級（或同等職級）的學者聯合提名 Nomination must be jointly made by **at least three** full professors (or scholars of equivalent rank) in relevant fields.
- ☐ 如由評審委員／歷屆得獎人提名，每位最多可提名一位候選人。Each adjudicator/ previous awardee shall nominate up to **one** candidate for the Award.
- ☐ 評審委員 Adjudicator\*      ☐ 歷屆得獎人 Previous awardee\*

\* 請勾選適用者 Please tick the box as appropriate

## I. 提名人資料 PARTICULARS OF THE NOMINATORS

### 提名人（一）Nominator (1)

稱謂	<input type="checkbox"/> 院士Fellow / <input type="checkbox"/> 教授Professor	
(中文姓名 Chinese Name)	Title*: 其他 _____	
(英文姓名 English Name)	_____	
工作機構／所屬單位名稱	(中文 Chinese)	_____
Name of Institution /		
Work Affiliation:	(英文 English)	_____
職銜	與候選人的關係	
Position:	Relationship with Nominee: _____	
郵寄地址	(中文 Chinese)	_____
Postal Address:	(英文 English)	_____
聯絡電話		
Contact Phone:	(辦公室 Office)	(手機 Cell Phone)
電郵		傳真號碼
Email:		Fax: _____

### 提名人（二）Nominator (2)

稱謂	<input type="checkbox"/> 院士Fellow / <input type="checkbox"/> 教授Professor	
(中文姓名 Chinese Name)	Title*: 其他 _____	
(英文姓名 English Name)	_____	
工作機構／所屬單位名稱	(中文 Chinese)	_____
Name of Institution /		
Work Affiliation:	(英文 English)	_____
職銜	與候選人的關係	
Position:	Relationship with Nominee: _____	
郵寄地址	(中文 Chinese)	_____
Postal Address:		

(英文 English) \_\_\_\_\_

聯絡電話  
Contact Phone: (辦公室 Office) \_\_\_\_\_ (手機 Cell Phone) \_\_\_\_\_  
電郵  
Email: \_\_\_\_\_ 傳真號碼  
Fax: \_\_\_\_\_

### 提名人 (三) Nominator (3)

(中文姓名 Chinese Name) \_\_\_\_\_ 稱謂 ☐ 院士Fellow / ☐ 教授Professor  
Title\*: 其他 \_\_\_\_\_

(英文姓名 English Name) \_\_\_\_\_

工作機構／所屬單位名稱 (中文 Chinese) \_\_\_\_\_  
Name of Institution /  
Work Affiliation: (英文 English) \_\_\_\_\_

職銜  
Position: \_\_\_\_\_ 與候選人的關係  
Relationship with Nominee: \_\_\_\_\_

郵寄地址 (中文 Chinese) \_\_\_\_\_  
Postal Address: (英文 English) \_\_\_\_\_

聯絡電話  
Contact Phone: (辦公室 Office) \_\_\_\_\_ (手機 Cell Phone) \_\_\_\_\_  
電郵  
Email: \_\_\_\_\_ 傳真號碼  
Fax: \_\_\_\_\_

## II. 提名原因 REASONS FOR NOMINATION

請以不超過600字簡述提名原因，內容必須列舉候選人所具備的條件。Please state the reasons for nomination by addressing the selection criteria in **no more than 600 words**. (FOR A NOMINATION MADE IN ENGLISH, A CHINESE TRANSLATION OF THIS SUMMARY MUST BE PROVIDED)

### III. 提名人聲明 Nominator's Declaration

1. 本人／我們謹此確認提名表格所列之提名原因獲相關／所有提名人士一致同意。  
I/ We hereby confirm that I/ we agree to the reasons for nomination stated in the nomination form.
2. 本人／我們謹此聲明，就本人／我們所知，此提名表格內所填報的資料及所附文件中的資料屬正確無誤。  
I/ We hereby declare that the information provided in this nomination form and the submitted documents is accurate to the best of my/our knowledge.
3. 本人／我們明白在此表格上所填報之資料，評審委員會及其他特邀專家學者將用作甄選得獎人之用。  
I/ We understand that the information provided in this form will be used by the Panel of Adjudicators and invited scholars and experts for the purpose of selecting the Award recipient.
4. 本人／我們同意遵守貢獻獎的規則及此表格內所列的規定，並明白假如本人／我們的提名文件並未依照表格內所列明的規定填報及提交，或提供的資料錯誤、失實或不全，本人／我們的提名將可能被作廢。  
I/ We agree to abide by the Award regulations and the rules stipulated in this nomination form. I/ We understand my/our nomination may be disqualified if it does not comply with the said rules or any of the information provided for this nomination is false, inaccurate or incomplete.
5. 本人／我們願意應獎項秘書處的要求 (如需要) 提供進一步資料，以供甄選得獎人之用。  
I am / We are prepared to provide further information for the purpose of selection of the Award recipients if and when requested by the Award Secretariat.
6. 如候選人獲獎，本人／我們同意香港浸會大學及其中醫藥學院使用、分發、發布、印製及／或複製列載於此表格，以及由於是次提名所收集到的相關資料，作獎項宣傳或公示監督之用。  
In the event that the nominee is selected as an awardee, I/ We hereby give permission to Hong Kong Baptist University and its School of Chinese Medicine to use, distribute, promulgate, print and/or duplicate the information provided in this nomination form and any other information collected as a result of this nomination, for publicity of the Award or public scrutiny purposes.
7. 本人／我們已閱讀及明白此表格的收集個人資料聲明。  
I/ We have read and understood the Personal Information Collection Statement of this nomination form.

### IV. 提名人簽署 Signature of Nominators

	提名人姓名 Name of Nominator	簽署 Signature	日期 Date
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

# 提名文件遞交清單 SUBMISSION CHECKLIST

在遞交提名表格前，請確保已提供下列所有文件。資料不全或逾期遞交之提名恕不受理。

Please ensure all of the following documents are ready before submission. Incomplete nomination form or submission received after the deadline will not be accepted.

<input type="checkbox"/> 提名表格（第一部份） Completed nomination form (Section One)
<input type="checkbox"/> 提名表格（第二部份） Completed nomination form (Section Two) (由候選人填寫並簽署 Filled out and signed by the nominee)
<input type="checkbox"/> 提名表格（第三部份A或B部） Completed nomination form (Section Three – Part A OR Part B) (由提名人／機構填寫並簽署 Filled out by the nominator(s)/nominating organisation)
<input type="checkbox"/> 候選人履歷 (中文及英文) 及其他證明文件副本 Nominee's resume (Chinese and English) and copies of credentials

## 遞交格式及方法 Format and Way of Submission

	電子版本 Electronic Copy		列印版本 Hard Copy
檔案格式 Format	MS WORD 檔案 MS WORD file	掃描版本（PDF 檔案） Scanned copies in PDF file	具簽名正本 Original with signature(s)
遞交方法 Way of submission	電郵提交 By email	電郵提交 By email	郵寄或專遞提交 By post or courier
提名表格 Nomination Form	✓ 無須蓋章和簽名 Organisation chop and signature not required	✓	✓
		須具各有關指定人士的簽名及提名機構的印章 (如適用) Must be signed by all designated persons and affixed with the nominating organisation's chop (if applicable)	
候選人履歷 (中文及英文) Nominee's resume (Chinese and English)	✓	✓	✓
其他資歷證明文件副本 包括但不限於證書/ 獎狀/ 委任信等 Copies of credentials, including but not limited to certificates/ award certificates/ letters of appointment or acknowledgement, etc.	N/A	✓ 合併為一個 PDF 檔案 Merged in one PDF file	✓ 影印本 Photocopies