**The Chinese University of Hong Kong**

**Technology Start-up Support Scheme for Universities (TSSSU)**

**Application Form for Staff Engagement in TSSSU Company**

***(for use by full-time CUHK staff)***

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| **Notes to staff applicants**1. Please read the CUHK-TSSSU Guidelines carefully. This Application Form is part and partial of an application for CUHK-TSSSU-O/ TSSSU+ if the Person-in-Charge and/or any members of the project team are full-time CUHK staff.
2. Please submit the originally signed Application Form on or before **7 November 2025** to KTO at Unit 1B, 1/F, Innoport, The Inter-University Hall, and a copy of this Application Form to the Human Resources Office (Attn: Ms. Kayan Ma, The Atrium, G/F, Lady Shaw Building)
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**For completion by the Person-in-Charge and each member of the TSSSU-O/TSSSU+ Applicant Team who is a full-time CUHK staff**[[1]](#footnote-2)\*

* Please make a copy of this form for each individual staff applicant.
* Enquiries pertaining to the completion of this form may be addressed to the Human Resources Office: Ms. Claire Chan at 3943 5514 / claire.chan@cuhk.edu.hk or
Ms. Kayan Ma at 3943 9897 / kyma@cuhk.edu.hk.

*(please tick* 🗹 *as appropriate)*

🞎 Person-in-Charge

🞎 Team member

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| TSSSU funding period under application: 1 April 2026 to 31 March 2027 |
| Name of Company: |
| Staff name:  | Employee ID:  |
| Department:  | Post:  |
| Email:  | Tel.:  |
| **A. Proposed Engagement**1. Capacity/Post title in the proposed technology start-up (if any):  2. Type(s) of work/activities to be undertaken:  3. Usual place of work: 🞎 The company premises/office 🞎 CUHK premises, please specify & complete item 9 in Section B below:  🞎 Others, please specify: |
| 4. Expected beneficial outcome(s) to Faculty/Department:   |
| 5. Estimated time involvement: hours per week within the University's usual operating hours (UOH) i.e. Mon to Fri (capped at 8 hours per week); hours per week outside UOH6. Please state the usual time pattern (e.g. Saturday, 9:00 am - 1:00 pm):  7. [Applicable to a **non-teaching staff member** who has involvement in the company during the University’s usual operating hours (i.e. Mon to Fri)] (Please tick 🗹 both to confirm understanding)🞎 I understand that the company will reimburse CUHK the corresponding staffing cost to the “appointment funding source” of the staff member concerned. The reimbursed staffing cost of each non-teaching member should be listed as a separate item of “Other Direct Costs” in the TSSSU application. The staff concerned should seek the prior agreement from his/her Department Chairperson/Unit Head for the proposed engagement (including the estimated time involvement) before presenting himself/herself for the TSSSU application. 🞎 I understand and agree that the time release will end soon after the company is no longer funded by  TSSSU. |
| **B. Declaration and Undertaking (to be completed by staff applicant)**(Pleasetick 🗹 as appropriate*.*)1. My engagement in the TSSSU company may involve the use of data and/or information of previous/current work and/or project(s) at the University: 🞎No 🞎Yes If yes, please elaborate:

Please seek agreement from your Department Chairperson/Unit Head for the proposed use of data/information and set out the proposed charges below: Proposed charges: $ or % of remuneration & Cost Centre/Project Code to be credited: 1. There will be office or lab space/special equipment/facilities/other resources of the Department used or other direct costs to the University: 🞎No 🞎Yes If yes, please elaborate: (University/Department resources):

 Please seek your department’s agreement for the proposed use of resources and set out the proposed charges below: Proposed charges: $ or % of remuneration & Cost Centre/Project Code to be credited:(Note: For special equipment/facilities funded by block grant, the above amount recovered should be credited to the Department’s/Unit’s one-line budget. For those funded by private fund sources, please specify the project code to be credited.) |
| **C. Confirmation and Acknowledgment (to be completed by staff applicant)**Please tick 🗹 all to indicate confirmation and acknowledgment:🞎 I confirm that I have read and fully understood the University Regulations Governing Outside Practice and Outside Business Activity. 🞎 I confirm that my proposed engagement will not adversely affect my University duties or cause disruption to the operation of my Department/Unit. I shall apply for leave to conduct the activity as required under the relevant University Regulations Governing Outside Practice and Outside Business Activity.🞎 I confirm that complete and accurate information has been provided in this application to the best of my knowledge. 🞎 I hereby acknowledge and confirm my proposed engagement in the TSSSU company as an individual in my own personal capacity, and not in any respect as a servant, employee or agent of, or on behalf of the University and that the engagement by me is outside the scope of my employment with the University. In consideration of the University releasing me to work for the TSSSU company, I acknowledge and agree that no liability whatsoever arising out of my undertaking of the said engagement may be attached to the University at any time and I undertake not to make any claims, demands, law suits whatsoever against or involving the University in respect of or in connection with my undertaking of the said work in any circumstances whatsoever.Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **D. Advice and Endorsement by Department Chair/Unit Head**1. I am involved/have financial interests in the proposed Company: 🞎 No 🞎Yes

If yes, you may not be in a proper position to consider/endorse this TSSSU application. The Dean of Faculty/Supervising Officer should serve as the endorsement authority. If you consider yourself in an appropriate position to make the recommendation, please provide an account and continue with the rest of this section.1. The appointee has already served full-load duties (i.e. both teaching and other duties). The proposed OP/OBA for the Company is undertaken in addition to and on top of the appointee’s University’s duties: 🞎Yes 🞎No

If no, please elaborate and advise on the arrangement on making up the teaching/duties:1. I am agreeable to the relevance of the proposed Company as advocated by the University’s funding initiative concerned and the expected beneficial outcomes stated by the appointee: 🞎Yes 🞎 See remarks below:

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Remarks:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Note: In respect of a non-teaching member of the applicant team who may have involvement in the TSSSU company during the University’s usual operating hours (i.e. Mon to Fri), the Company must reimburse CUHK the corresponding staffing cost to the “appointment funding source” of the staff member concerned. The reimbursed staffing cost of each non-teaching staff member through TSSSU should be listed as a separate item of “Other Direct Costs” in the TSSSU application.]1. (Applicable if items 8 and/or 9 under “Section B - Declaration and Undertaking” completed by the staff applicant above is/are indicated “Yes”)

The particulars of the proposed use of university and/or department resources indicated in items 8 and/or 9 under “Section B - Declaration and Undertaking” completed by the staff applicant as mutually agreed between the Department and the staff applicant is confirmed: 🞎Yes 🞎 NoIf no, please state below the alternative arrangement and/or charges as newly agreed with the staff applicant: Proposed charges: $ or % of remuneration & Cost Centre/Project Code to be credited:(Note: For special equipment/facilities funded by block grant, the above amount recovered should be credited to the Department’s/Unit’s one-line budget. For those funded by private fund sources, please specify the project code to be credited.)1. Based on the information submitted by the staff applicant and my comments above, I indicate my endorsement or otherwise below:

🞎Endorsed 🞎Not endorsedDate:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name in block:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **E. To be completed by Faculty Dean/Supervising Officer (or the Provost in case Faculty Dean/Supervising Officer is the endorsement authority in Section D above)**Application for engagement in the TSSSU company is 🞎 approved. 🞎not approved.Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name in block:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. \* Late submission of this form will NOT be accepted. [↑](#footnote-ref-2)