

THE UNIVERSITY OF HONG KONG
DEPARTMENT OF MATHEMATICS,
SCHOOL OF COMPUTING AND DATA SCIENCE

**ARIN7600 Artificial intelligence project
Registration Form**

Please submit the scanned copy of the completed form with supervisor's signature to mscai@maths.hku.hk by the registration deadline.

I. PROJECT INFORMATION

Supervisor: _____ Faculty/ Department: _____

Proposed Project Title: _____

Project Description: _____

(Please attach additional sheets if necessary)

II. PERSONAL PARTICULARS

Student No. 1 would be the primary contact person for ARIN7600. Each group should contain 3-4 members.

1. Full Name (English): _____ 2. Full Name (English): _____

University No.: _____ University No.: _____

HKU Email: _____ HKU Email: _____

Contact No.: _____ Contact No.: _____

3. Full Name (English): _____ 4. Full Name (English): _____

University No.: _____ University No.: _____

HKU Email: _____ HKU Email: _____

Contact No.: _____ Contact No.: _____

I/We fully understand the course requirements and enrolment procedures, and that violations could result in direct failure of the course. *(Application will be rejected if the box is not checked)*

I/We understand that the work produced could be displayed on platforms such as Moodle for teaching and learning purposes. *(Application will be rejected if the box is not checked)*

III. SUPERVISOR APPROVAL

Supervisor: _____ Date: _____

FOR OFFICIAL USE

*Approved / Rejected: _____ Date: _____
*(*Please delete as appropriate) Course Coordinator*

Remarks: _____