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

**Request for Material Modifications to the Approved Budget**

**NOTES**

1. Section A to Section C should be completed by the person-in-charge of the start-up funded under TSSSU. Section D should be completed by the respective university unit responsible for TSSSU.
2. Please read the relevant guidelines from the associated university before completing this form.
3. The information provided in this form will be used for processing the material modification request and related purposes by the Innovation and Technology Commission (ITC) and the associated university. It may be disclosed to other Government bureaux/departments, statutory bodies or third parties for the above said purposes or required by law. This submission denotes that the start-up concerned and the university unit responsible for TSSSU have given explicit consent to such disclosure.

**SECTION A: Particulars of the Start-up***(To be completed by the person-in-charge of the start-up funded under TSSSU)*

|  |  |  |
| --- | --- | --- |
| **TSSSU reference no.** | : |  |
| Name of start-up | : |  |
| Name of the associated university | : | The University of Hong Kong |
| Maximum amount of TSSSU funding approved | : | $ |
| Reimbursable period | : | 01/04/2024 - 31/03/2025 |

**SECTION B: Modifications to the Latest Approved Budget***(To be completed by the person-in-charge of the funded start-up)*

All fields below should be completed.

1. **Manpower**

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| **Post** | **New Expenditure item?** *(Tick if yes)* | **Latest Approved Entries** *(Please fill in N/A if the expenditure item is to be newly added into the budget)* | | | | **Proposed Modifications** | | | | |
| **No. of Staff (A)** | **Duration (man- months) (B)** | **Monthly Rate or Equivalent (HK$) (C)** | **Total(HK$) (A)x(B)x(C)** | **No. of Staff (A)** | **Duration (man- months) (B)** | **Monthly Rate or Equivalent (HK$) (C)** | **Total(HK$) (A)x(B)x(C)** | **Justifications for the Proposed Modifications** |
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|  |  | **Sub-total of Original Entries to be Modified** | | |  | **Sub-total of Modified Entries** | | |  |  |

1. **Equipment**

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| **Equipment** | **New Expenditure item?** *(Tick if yes)* | **Latest Approved Entries** *(Please fill in N/A if the expenditure item is to be newly added into the budget)* | | | **Proposed Modifications** | | | |
| **Quantity (A)** | **Unit Cost (HK$) (B)** | **Total(HK$) (A)x(B)** | **Quantity (A)** | **Unit Cost (HK$) (B)** | **Total(HK$) (A)x(B)** | **Justifications for the Proposed Modifications** |
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|  |  | **Sub-total of Original Entries to be Modified** | |  | **Sub-total of Modified Entries** | |  |  |

1. **Other Direct Costs**

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| **Item** | **New Expenditure item?** *(Tick if yes)* | **Latest Approved Entries** *(Please fill in N/A if the expenditure item is to be newly added into the budget)* | | | **Proposed Modifications** | | | |
| **Quantity (A)** | **Unit Cost (HK$) (B)** | **Total(HK$) (A)x(B)** | **Quantity (A)** | **Unit Cost (HK$) (B)** | **Total(HK$) (A)x(B)** | **Justifications for the Proposed Modifications** |
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|  |  | **Sub-total of Original Entries to be Modified** | |  | **Sub-total of Modified Entries** | |  |  |

1. **The modifications listed above (please tick the box as appropriate):**

have not been made

have been made prior to seeking the university’s approval because of the following reason(s):

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and I/we consider that such modifications can facilitate the realisation of the business proposal in the following way(s):

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**SECTION C: Declaration***(To be completed by the person-in-charge of the funded start-up)*

I/We hereby declare that all factual information provided in this change request as well as the accompanying information accurately reflects the status of affairs as at the date of submission.

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| Authorised Signature with Company Chop | : |  |  | - Chop - |
| Name of Person-in-charge | : |  |  |
| Name of Company | : |  |  |
| Date (dd/mm/yy) | : |  |  |

**SECTION D: Approval by the University** *(To be completed by the respective university unit responsible for TSSSU)*

Please tick the appropriate box to indicate whether the university approves this change request.

I/We approve this change request from *(name of the start-up)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and consider that the modifications in Section B above are reasonable, proportionate and proper.

*(Note: Please tick this box if the start-up’s explanation provided in Section B(d) above for not seeking prior approval is to the university’s satisfaction.)* I/We are satisfied with the start-up’s explanations for not seeking the university’s prior approval for the modifications.

I/We DO NOT approve this change request from *(name of the start-up)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.  
 *(Note: In this case, this form needs not be provided to ITC.)*

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| --- | --- | --- |
| Signature | : |  |
| Name | : |  |
| Post Title | : |  |
| Tel. No. | : |  |
| E-mail | : |  |
| Date (dd/mm/yy) | : |  |