2017年教育部華語文獎學金申請表 Huayu Enrichment Scholarship 2017 Application Form

姓名/Name:
聯絡電話/Contact No.:
電子郵件/E-mail.:
擬就讀之語文中心/
Language Center
收件日期/Date Received:

INSTRUCTIONS:

This application form **should be typed** in English or Chinese and completed by the applicant. Each question must be answered clearly and completely. Detailed answers are required in order to make the most appropriate arrangements. If necessary, additional pages of the same size may be attached.

本表請申請人以英文或中文詳實工整填寫,慎勿遺漏,以利配合作業,如有需要,

申請人可自行以同款紙張加頁說明。

1. CHECK LIST 文件一覽表

項目 *所有文件需按照順序排列 Please arrange the documents in following sequence	Applicant	For Office Use
獎學金申請表 Application Form		
護照影本 A copy of the applicant's passport		
最高學歷證明及成績單影本 A copy of the highest degree and academic transcripts		
已向華語文中心提出申請之證件影本 A photocopy of the applications to the Mandarin Language Center.		
其他經本處要求提供之證明表件(視情形需要) Additional documents as specified by the individual representative offices		
Remark:		

2. PERSONAL DATA 個人基本資料

Name	Surname (Last name) :			
姓名	Given Name(s):	Please attach a photograph that has		
	Chinese Name 中文姓名:	been taken within the last 3 months.		
City and Country of Birth		最近三個月相片		
出生城市及國別				
Nationality	Singapore			
國籍	新加坡			
Contact Information	Permanent Address永久地址:			
聯絡資訊				
	Mailing Address (If different from above)郵寄地址:			
	maning radios (if amorone from accvo)s 4 vos			
	Telephone電話: Cell phone 手機:			
	E-mail電子郵件:			
	2 mm g 1 × 11			
Gender	Male 男 Female 女			
性別				
Marital Status	Single 單身 Married 已婚			
婚姻狀況				
Date of Birth	(Day日/Month 月/Year 年):			
生日日期	. , ,			
Past Residence in 9Taiwan	Never 否 Yes 是			
曾否居住臺灣	*If Yes, please specify; 若是,請註明:			
	From從 (dd/mm/yr) to至 (dd/mm/yr);			
	Reason for staying in Taiwan居住事由:			
Taiwan Scholarship/ Huayu Enrichment Scholarship Award History	None 無 Yes 是 *If Yes, please specify; 若是,請註明:			
臺灣獎學金/華語文獎	From從 (dd/mm/yr) to至 (dd/mm/yr);			
學金受獎紀錄	Type(s) of Scholarship Awarded 獎項名稱:			
Health Condition				
健康狀況 Excellent佳 Good好 Fair差				

Chronic Diseases 曼性病						—Please specify請指明:						
Emergency Contact Details 緊急事件聯絡人		Name始 Address			1	Relations	ship 關信	ķ :				
		Tel電話: Cell phone 手機: E-mail 電子郵件:										
LANGUAGE I	PROFI	CIENC	CY語言	宇能力						,		
Language Proficiency	COMI	COMPREHENSION 聽			READING 讀		WRITI 寫		IG	SPEAKING 說		
語言能力	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fai 可
CHINESE												
ENGLISH												
Other (please state)												
EDUCATIONA Level 程度	AL BA)教育 titution	<u>背景</u>	Со	untry/C 地點	ity	Peri	od of En 修業年		ıt
Secondary Education 中學												
Undergraduate Level Education 大學												
Graduate Level Education 研究所												
REFERENCES 3	作薦 單	位(人)資料	<u>.</u>				·				
Name 姓名	<u> </u>		Position 職務			Phone, E-Mail or Mailing Address 電話及郵電地址						

6. PREVIOUS EMPLOYMENT 工作經歷 (Use one line for each po	sition)	
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Position 職務	Co	ompany/Organization 機構名稱	Period o Employmo 服務期間	ent	Responsibilities 工作說明
PRESENT E	MPLO	DYMENT 現職狀況			
Company/ Organization		7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
機構名稱					Γ
osition				From	
战稱				起始日期	
Contact Informa	tion	Address 地址:			
养絡資訊				L	
		-	ohone: Fa	x 電傳:	
		E-mail 電子郵件:			
Type of organiza	ition	☐ Govt. Ministry/ Agency 政		_	Institution 大學校院
機構種類		Govt./State-owned Enterpr	rise 公營企業	Locally-ow	/ned Enterprise 私人企業
		☐ Joint Venture 合資企業	Foreign-owned	國際公司 🗌	NGO Enterprise 非政府機構
resent Duties & ears of imployment	ż				
見任職務及資歷	年限				
擬就讀之語 (For information	文中心 n abou	NTER WHERE YOU PI t university-affiliated languag h.moe.gov.tw/ct.asp?xItem=14	ge centers in Taiv	van, please vis	
 Iniversity-affil	liated 1	language center:			

9. BRIEFLY STATE YOUR STUDY PLAN WHILE IN TAIWAN 請簡述在臺計畫

). DECLARATION:	
I declare that:	
	oplication is complete and accurate to the best of
A liaguetta Cionagenna to at te 文 ク	Data ri ibn · / /
Applicant's Signature申請者簽名	Date日期:/