教育部華語文獎學金 Application Check List

Applicant's Name:

Please	tick off the documents enclosed in the application.
	Application Form.
	A copy of the applicant's passport or other nationality certificates.
	A copy of the highest degree and academic transcripts.
	A copy of admission application materials to universities/colleges in Taiwan
	A copy of a certificate for the "Test of Chinese as a Foreign Language" (TOCFL), if you
	have taken the exam.
	Two letters of reference signed and sealed in envelopes (i.e. from the principals, professors,
	or supervisors). Photo copies and email submissions of letters of recommendation will not be
	considered.
	Additional documents:
Appli	icant's Signature
	Date
	/

Application Form for ROC (Taiwan) Ministry of Education Huayu Enrichment Scholarship

INSTRUCTIONS:

This application form should be typed 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.

申請人請詳實工整填寫,慎勿遺漏,以利配合作業,如有需要,可自行以同款紙張加頁說明。

1. PERSONAL DATA 個人基本資料

a.NAME姓名	Title 稱謂: Mr./Mrs./Ms. Surname (Last name) 姓: Given Name(s) 名: Chinese Name 中文姓名:	Please attach a photograph that has been taken within the last 3 months. 最近三個月相片
b. CITY and COUNTRY OF BIRTH 出生城市 及國別		
c. NATIONALITY國 籍	*Note: If you are an overseas Chinese student, or passport, you are not eligible to apply.	or hold a valid R.O.C.
d. CONTACT INFORMATION 聯絡地址、電話、 電子郵件	Permanent Address永久地址: Mailing Address (If different from above)郵寄地址: Telephone電話: E-mail電子郵件: Cell phone:	
e. SEX性別	□ Male 男 □ Female女	
f. MARITAL STATUS 婚姻狀況	□ Single單身 □ Married 已婚	
g. DATE OF BIRTH 生日	(Day日/Month 月/Year 年):	
h. PAST RESIDENCE in TAIWAN 曾否居住台灣	□Never 否; □Yes, from (dd/mm/yr) to 迄日期; reason for staying in Taiwan居住事由:	(dd/mm/yr);是,起

i. Taiwan Scholarship/ Huayu Enrichment Scholarship Award History台灣獎學金/ 華語文獎學金受獎 紀錄	□None 無; □Y 迄日期。		(dd/mm/yr) to larship Awarded:	(dd/mm/yr);是,起
j. HEALTH CONDITION	☐ Excellent	Good	Fair	
健康狀況				
k. ANY CHRONIC DISEASES	□ None無			
慢性病	□ Yes有—Pl	ease specify請指 E	明:	
I. CONTACT	Name姓名:		Relationship	關係:
PERSON, IN CASE OF AN EMERGENCY	Address地址:			
緊急事件聯絡人	Tel電話:		E-mail 電子郵件:	

2. LANGUAGE PROFICIENCY語言能力

LANGUAGE	COMPRE	COMPREHENSION 聽			READING 讀			WRITING 寫			SPEAKING 說		
PROFICIEN													
CY													
語言能力													
CHINESE	Excelle nt 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	
ENGLISH													
Other (please state)													

I	have	never	taken	Test	of	Chine	ese	as]	Fore	eign	Language ((TOC	FL)		
] I	have	taken	TOCFL	and	encl	osed	a	сору	of	the	certificat	te i	n this	applicat	ion

3. EDUCATIONAL BACKGROUND 教育背景

Level 程度	Name of Institution 校名	Country/City 地點	Period of Enrollment 修業年限
Secondary			
Education 中學			
Undergraduate Level Education 大學			
Graduate Level Education 研究所			

4. REFERENCES 推薦單位 (人) 資料

Name 姓名	Position職務	Phone, E-Mail or Mailing Address電話及郵電 地址

5. PREVIOUS EMPLOYMENT 工作經歷 (Use one line for each position)

Position 項	敞務	Company/Organization 機構名稱	Period of Employment 服務期間	Responsibilities 工作說明

6. PRESENT EMPLOYMENT 現職狀況

a. COMPANY/ ORGANIZATION 機構名稱		
b. POSITION 職稱		c. From起始日期
d. CONTACT	Address 地址:	
INFORMATION 聯絡資訊	Tel 電話:	Cell phone:
	Fax 電傳:	E-mail 電子郵件:

e. TYPE OF ORGANIZATION 機構種類	□ Govt. Ministry/ □ University/ □ Govt./State-owned Agency政府部門 Institution大學校院 Enterprise 公營企業					
	□ Locally-owned □ Joint Venture □ Foreign-owned 私人企業 合資企業 國際公司					
	□ NGO Enterprise 非政府機構					
7. LANGUAGE CENTER WHERE YOU PLAN TO ATTEND IN TAIWAN擬就讀之語文中心						
University-affiliated langu	University-affiliated language center:					
I apply to study at this cen	ter formonths. (from/2019 to/20)					
8. BRIEFLY STATE YOUR STUDY PLAN WHILE IN TAIWAN請簡述在台讀書計畫						
9. DECLARATION:						
	given on this application is complete and accurate to the best of my knowledge.					
Annicondo Signatura						
Applicant's Signature	Date					