

教育部華語文獎學金申請表

Application Form for ROC (Taiwan) Ministry of Education Huayu Enrichment Scholarship 2019

The application deadline is March 31, 2019.

INSTRUCTIONS:

This application form MUST be typed <u>in blue</u> 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 $(請用\underline{藍色})$,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					
	+Passport number: *Note: If one or both of your parents were an ROC nation birth, you are an ROC national as well and therefore no				
d. CONTACT INFORMATION	Permanent Address 永久地址:				
聯絡地址、電話、電子 郵件	Mailing Address (If different from above)郵寄地址:				
21 11	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 (dd/mm/yr);是,起迄日期; reason for staying in Taiwan 居住事由:
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; □Yes, from (dd/mm/yr) to (dd/mm/yr);是,起迄日期。 Type(s) of Scholarship Awarded:
j. HEALTH CONDITION 健康狀況	☐ Excellent ☐ Good ☐ Fair
k. ANY CHRONIC DISEASES 慢性病	□ None 無 □ Yes 有—Please specify 請指明:
I. CONTACT PERSON, IN CASE OF AN EMERGENCY	Name 姓名: Relationship 關係: 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 PROFICIENCY	COMPREHENSION 聽		READING 讀		WRITING 寫			SPEAKING 說				
語言能力	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair
TO B ACV	優	良	可	優	良	可	優	良	可	優	良	可
CHINESE												
ENGLISH												
Other (please state)												

3. EDUCATIONAL BACKGROUND 教育背景

Level 程度	Name of Institution 校名	Department 科系	GPA 成績	Country/City 地點	Period of Enrollment (mm/yyyy-mm/yyyy) 修業年限
Secondary Education 中學					

Undergraduate Level Education 大學						
Graduate Level Education 研究所						
REFERENCES ‡ professors, or teac part of the applicat	hers; two refere					
Name 姓名	Position 職務	Phoi	ne, E-Ma	il or Mailing Ao	ddress T	話及郵電地址
PREVIOUS EMPI	 LOYMENT 工作	·經歷 (Use one	line for each	ch position)		
Position 職務	Company/Organ 機構名稱		Period of Employment 服務期間			Responsibilities 工作説明
PRESENT EMPLO	OYMENT 現職;	状況				
^a · COMPANY/ ORGANIZATION 機構名稱						
b _. POSITION 職稱				c. From 起	始日期	
d. CONTACT	Address 地址: Tel 電話:		C	ell phone:		
INFORMATION 聯絡資訊	Fax 電傳:			mail 電子郵件:		

e. TYPE OF ORGANIZATION 機構種類	□ Govt. Ministry/ Agency 政府部門 □ Locally-owned Enterprise 私人企業	□ University/ Institution 大學校院 □ Joint Venture □ Foreign-c 合資企業 Ente	□ Govt./State-owned Enterprise 公營企業 owned □ NGO orprise 國際公司 非政府機構
		U PLAN TO ATTEND IN language centers in Taiwan, plea	TAIWAN 擬就讀之語文中 ase see the attachment "List of
University-affiliate	d language center:		
8. BRIEFLY STATE Y	YOUR STUDY PL	AN WHILE IN TAIWAN	請簡述在台讀書計畫

9. DECLARATION:

I declare that:

- The information I have given on this application is complete and accurate to the best of my knowledge.
- > I agree to be automatically disqualified for HES if I fail to submit all the necessary documents in time.

Applicant's Signature	Date	
		/

The application deadline is March 31, 2019

Application Checklist:

Please complete this checklist and enclose it with your application package. Please make a note of "HES 2019" on envelope, mail all the necessary documents <u>in one package</u> and send to our office before March 31, 2019.

Taipei Representative Office, Bratislava (TROB)

Mostova 2, 81102 Bratislava, Slovak Republic

Package should include:

A duly-filled application form	\Box Yes	$\square No$
A photocopy of passport page	\Box Yes	□No
A photocopy of transcript	□Yes	□No
A photocopy of highest-degree diploma	\Box Yes	□No
A photocopy of the applications to the language centers you are applying	\Box Yes	□No
Two (2) <u>sealed and signed</u> recommendation letters	\Box Yes	□No
A motivation letter	\Box Yes	□No
A duly-signed Terms of Agreement Ministry of Education HES Program	\Box Yes	□No