教育部華語文獎學金申請表

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. Gender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 起迄日期; reason for staying in Taiwan居住事由	(dd/mm/yr);是,

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 緊急事件聯絡人	Name姓名: Relationship 關係: Address地址: Tel電話: E-mail 電子郵件:

2. LANGUAGE PROFICIENCY語言能力

COMPREHENSION 聽		READING 讀		WRITING 寫		SPEAKING 說					
cellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可
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3	FDUCATIONAL	BACKGROUND	粉育背暑
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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			
7.1			
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 務	職	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 INFORMATION 聯絡資訊	Address 地址: Tel 電話: Fax 電傳:	Cell phone: E-mail 電子郵件:

e. TYPE OF ORGANIZATION	☐ Gov't. Ministry/ ☐ University/ ☐ Gov't./State-owned
機構種類	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
University-affiliated langua	age center:
7. LANGUAGE CENTER WHE	RE YOU PLAN TO ATTEND IN TAIWAN擬就讀之語文中心
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8. BRIEFLY STATE YOUR ST	UDY PLAN WHILE IN TAIWAN請簡述在台讀書計畫
9. DECLARATION:	
I declare that: The information I have gi	ven on this application is complete and accurate to the best of my knowledge.
Applicant's Signature	Date