甲表 (新申請者用) Form A (For new applicants only)

教育部臺灣獎學金申請表 APPLICATION FORM FOR THE MOE TAIWAN SCHOLARSHIP

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打字工整填寫,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。

Please check. 請選以下選項

| Which type of scholarship are you applying for? |
|---|
| □ Undergraduate Scholarship 大學獎學金 |
| □ Master Scholarship 碩士獎學金 |
| □ Doctoral Scholarship 博士獎學金 |
| |

1. PERSONAL DATA 個人基本資料

| a.NAME姓名 (Please makesure sameasin Passport) | Title 稱謂: Mr./Mrs./Ms. Surname (Last name)姓: | Please attach a recent photograph taken within the last 3 months. | | |
|---|--|---|----------|--|
| | Given Name(s) 名: | | 最近三個月相片 | |
| | Chinese Name 中文姓名: | | | |
| b. CITYand COUNTRYOF | | | | |
| BIRTH 出生.城市及國別 | | | | |
| c. NATIONALITY 國籍 | | | | |
| | *Note: If one or both of your parents was you are an ROC national as well and there | | | |
| | Do you hold the Alien Permanent Resid | ent Certificate | of ROC? | |
| | □Yes □No | | | |
| | PARENT 1 | P | PARENT 2 | |
| d. PARENTS' | Name 姓名: | Name 姓名: | | |
| INFORMATION | Nationality 國籍: | Nationality 國籍: | | |
| 家長資料 | Place of Birth 出生地: | Place of Birth 出生地: | | |
| | | | | |

| e. 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 手機: | |
|---|--|---|
| f. SEX 性別 | □Male 男 □ Female 女 | |
| g· MARITAL STATUS 婚姻狀況 | □Single 單身 □Married 已 婚 | |
| h. DATE of BIRTH 生日 | (Day 日/Month 月/Year 年): | |
| i. PAST RESIDENCE in TAIWAN 居住臺灣 | □Never 否;□Yes, from (dd/mm/yr) to (dd/mm/yr).是,起迄日期 reason for residence 居住事由: | 月 |
| j. Taiwan Scholarship/ Huayu Enrichment Scholarship Award History 臺灣獎學金/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: | |
| k. HEALTH CONDITION 健康狀況 | □Excellent □Good □ Fair | |
| l. CONTACT PERSON, IN CASE OF AN EMERGENCY 緊急事件聯絡人 | Name姓名: Relationship 關係: Address 地址: Telephone 電話: E-mail 電子郵件: Cell phone 手機: | |

2. LANGUAGE PROFICIENCY 語言能力

| LANGUAGE PROFICIENCY | COMP | REHE 聽 | NSION | READING 讀 | | | WRITING 寫 | | | SPEAKING 說 | | |
|-------------------------|----------------|-----------|-----------|----------------|-----------|-----------|----------------|-----------|-----------|----------------|-----------|-----------|
| 語言能力 | Excellent 優 | Good 良 | Fair 可 |
| CHINESE | | | | | | | | | | | | |
| ENGLISH | | | | | | | | | | | | |

| Oth | ner, please state) | | | | | | | | | | | | | |
|-----|--------------------------|-----------------|------|---------------------------|----------------|-------|--------|---------|------------------------------|------------------------------|---------|------|-------------------|---|
| F | EDUCATION | NAL B | ACKO | GROUN | ID 教 | 育背景 | | | | | | | | = |
| | Level 程 | 度 | | Name of Institution 校名 | | | on | | Country 地 | y Period of Enrollme 修業年限 | | | | |
| 3 | Secondary | | | | | | | | | | | | | |
| | Education 中 | 學 | | | | | | | | | | | | |
| 1 | | te Leve | 1 | | | | | | | | | | | |
| | Education 大 | 學 | | | | | | | | | | | | |
| ŀ | Graduate Lev | vel | | | | | | | | | | | | |
| | Education 研 | 究所 | | | | | | | | | | | | |
| F | REFERENC | ES 推 | 薦單位 | 立(人) | 資料 | | | | | | | | | |
| Ī | Name 🌣 | 生名 | Po | sition F | 哉務 | Telep | hone , | E-Ma | il or Mail | ing Ad | dress F | 電話及郵 | 邓電地 址 | : |
| I | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| F | PREVIOUS | EMPL | | | | | 1 | | | | | | | |
| | PREVIOUS I Position 職 | | | pany/O | | | 1 | eriod o | on) 工作的 of Employ 服務期間 | | | _ | nsibilitie :說明 | 3 |
| | | | | pany/O | rganiz | | 1 | eriod o | of Employ | | | _ | | 5 |
| | | | | pany/O | rganiz | | 1 | eriod o | of Employ | | | _ | | |
| | | | | pany/O | rganiz | | 1 | eriod o | of Employ | | | _ | | |
| | Position 職 | 務 | Com | npany/O 機構 | Prganiza 名稱 | ation | 1 | eriod o | of Employ | | | _ | | 5 |
| | | 務 MPLO Y/ | Com | npany/O 機構 | Prganiza 名稱 | ation | 1 | eriod o | of Employ | | | _ | | 5 |

| d. CONTACT INFORMATIO | Address 地址: N | | |
|--|---------------------------------|---|--------------------------|
| 聯絡資訊 | Telephone 電話: | Cell phone 手機: | |
| | Fax 電傳: | E-mail 電子郵件: | |
| e. TYPE OF ORGANIZATIO | ingency =X/13 HP1 3 | □University/ Institution 大學校院 | Enterprise 公營企業 |
| 機構種類 | □ Locally-owned Enterprise 私人企業 | □ Joint Venture □ Internation 合資企業 Enterprise 國際 | nal □ NGO 際公司 非政府國際組紀 |
| f. PRESENT DUTIES & YEARS OF EMPLOYMENT 現任職務及資歷年 | | | |
| 7. UNIVERSITY/I 擬就讀之大學校 | | YOU PLAN TO ATTEND IN TA | AIWAN |
| University/colleg | ge and department: | | |
| | | | |

| 8. PLEASE BRIEFLY STATE YOUR STUDY PLAN WHILE IN TAIWAN 請簡述在臺讀書計畫 |
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| 9. DECLARATION: I declare that: |
| I am neither concurrently an ROC national, nor an overseas compatriot of the ROC, nor hold the Alien Permanent Resident Certificate of ROC; |
| $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $ |
| ☐ I am not applying for this scholarship as an exchange student resulting from an agreement signed between my home institution and any Taiwan university/college; |
| ☐ The information I have given on this application is complete and accurate to the best of my knowledge. |
| 10. CHECK LIST |
| ☐ Application Form. |
| ☐ A copy of the applicant's passport or other nationality certificates. |
| \square A copy of the highest degree and academic transcripts. |
| ☐ A copy of admission application materials to universities/colleges in Taiwan |
| ☐ A copy of a language proficiency certificate: |
| 1. A copy of results or certificate for the "Test of Chinese as a Foreign Language" (TOCFL) Level3 or above. |

2. For applications to all-English programs, a copy of TOEFL test scores or other recognized English language proficiency exams or degrees awarded in English must be submitted. English-speaking nationals are exempt from this rule.

| Two letters of reference signed and sealed in envelopes (i.e. from the prin supervisors). Photo copies and email submissions of letters of recomm considered. | |
|---|------|
| ☐ Additional documents as specified by the individual representative offices. | • |
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| | |
| Applicant's Signature | |
| | |
| | |
| | Date |
| | Date |
| | / / |
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