



2018年教育部華語文獎學金申請表
Huayu Enrichment Scholarship 2017
Application Form
(For Malaysian Students only)

姓名/Name:

聯絡電話/Contact No.:

電子郵件/E-mail.:

For office use only: _

申請編號/Application No.:

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 姓名	Surname (Last name) : Given Name(s) : 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
City and Country of Birth 出生城市及國別		
Nationality 國籍	*Note: If you are an overseas Chinese student, or hold a valid R.O.C. passport, you are not eligible to apply.	
Contact Information 聯絡資訊	Permanent Address永久地址 : Mailing Address (If different from above)郵寄地址 : Telephone電話 : Cell phone 手機 : E-mail電子郵件 :	
Gender 性別	<input type="checkbox"/> Male 男 <input type="checkbox"/> Female 女	
Marital Status 婚姻狀況	<input type="checkbox"/> Single 單身 <input type="checkbox"/> Married 已婚	
Date of Birth 生日日期	(Day日 / Month 月 / Year 年):	
Past Residence in Taiwan 曾否居住臺灣	<input type="checkbox"/> Never 否 <input type="checkbox"/> Yes 是 *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 臺灣獎學金/華語文獎學金受獎紀錄	<input type="checkbox"/> None 無 <input type="checkbox"/> Yes 是 *If Yes, please specify; 若是，請註明： From從 (dd/mm/yr) to至 (dd/mm/yr); Type(s) of Scholarship Awarded獎項名稱:	

Health Condition 健康狀況	<input type="checkbox"/> Excellent佳 <input type="checkbox"/> Good好 <input type="checkbox"/> Fair差
Chronic Diseases 慢性病	<input type="checkbox"/> None無 <input type="checkbox"/> Yes有—Please specify請指明： _____
Emergency Contact Details 緊急事件聯絡人	Name姓名： _____ Relationship 關係： _____ Address地址： _____ Tel電話： _____ Cell phone 手機： _____ E-mail 電子郵件： _____

3. LANGUAGE PROFICIENCY 語言能力

Language Proficiency 語言能力	COMPREHENSION 聽			READING 讀			WRITING 寫			SPEAKING 說		
	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可
CHINESE												
ENGLISH												
Other (please state)												

4. 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			

5. 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

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

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

7. PRESENT EMPLOYMENT 現職狀況

Company/ Organization 機構名稱			
Position 職稱		From 起始日期	
Contact Information 聯絡資訊	Address 地址： Tel 電話： Cell phone: Fax 電傳： E-mail 電子郵件：		
Type of organization 機構種類	<input type="checkbox"/> Govt. Ministry/ Agency 政府部門 <input type="checkbox"/> University/ Institution 大學校院 <input type="checkbox"/> Govt./State-owned Enterprise 公營企業 <input type="checkbox"/> Locally-owned Enterprise 私人企業 <input type="checkbox"/> Joint Venture 合資企業 <input type="checkbox"/> Foreign-owned 國際公司 <input type="checkbox"/> NGO Enterprise 非政府機構		
Present Duties & Years of Employment 現任職務及資歷年限			

8. LANGUAGE CENTER WHERE YOU PLAN TO ATTEND IN TAIWAN

擬就讀之語文中心

(For information about university-affiliated language centers in Taiwan, please visit the following website for reference: <http://english.moe.gov.tw/ct.asp?xItem=14462&CtNode=11424&mp=1>)

University-affiliated language center:

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

10. DECLARATION:

I declare that:

The information I have given on this application is complete and accurate to the best of my knowledge.

Applicant's Signature 申請者簽名

Date 日期： ____ / ____ / ____