



嘉南藥理大學雙聯學制外國學生入學申請表  
Chia Nan University of Pharmacy and Science  
Application Form for DDP-International Students

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photograph here

\*填寫前請先閱讀申請人注意事項/Please read INSTRUCTIONS first.

1. 申請人資料/Personal information

名/Given name: \_\_\_\_\_ 姓/Family name: \_\_\_\_\_  
 中文姓名/Chinese name: \_\_\_\_\_ 國籍/Nationality: \_\_\_\_\_ 性別/Sex: 男/M 女/F  
 出生日期/Date of birth: \_\_\_\_\_ 年/Year \_\_\_\_\_ 月/Month \_\_\_\_\_ 日/Day  
 護照號碼/Passport No.: \_\_\_\_\_ \*學生證號/Student ID.: \_\_\_\_\_  
 通訊處/Mailing address: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ 傳真/Fax: \_\_\_\_\_ 電話/Tel: \_\_\_\_\_

2. 學歷/Education

學校 Educational Institute	修業起迄年月 Duration (from/to)	主修 Field of Study	文憑 Diploma
_____	_____	_____	_____
_____	_____	_____	_____

3. 語言能力/Language proficiency

	讀/Reading	寫/Writing	聽/Listening	說/Speaking
中文/Chinese:	_____	_____	_____	_____
英文/English:	_____	_____	_____	_____

(請用優,佳,可,差/Please use one of these words : Excellent, Good, Fair, Poor)

4. 讀書計畫/Study plan

修讀學位/Degree program: 碩士/Master 學士(四年制)/Four-year bachelor program  
學士(二年制)/Two-year bachelor program 選讀學分/Part-time program  
 申請系所別或選讀科目/Department or courses applied for:  
 \_\_\_\_\_

5. 在華研習期間費用來源/Means of financial support

\_\_\_\_\_

6. 所欲申請之獎助金/Types of financial aid

免住宿費/Housing fee waiver

\_\_\_\_\_

7. 健康情形/Health condition

\_\_\_\_\_

申請人簽名/Signature of applicant: \_\_\_\_\_ 日期/Date: \_\_\_\_\_