國立臺北大學外籍教職員工旁聽華語課程申請表

Application Form for Foreign Faculty and Staff Auditing Mandarin Courses   
at the Chinese Language Center, ICSI, NTPU

日期： 年 月 日

Date: YYYY / MM / DD

|  |  |
| --- | --- |
| **姓名**  **Name** |  |
| **學系/單位**  **Department** |  |
| **電子郵件信箱**  **E-mail Address** |  |
| **符合資格條件**  **Qualification Criteria** | □ 1.本校外籍教職員工  　　Foreign faculty and staff of the University  □ 2.一學期以上之訪問學者  　　Visiting scholars with a duration of one semester or more  □ 3.一學期以上之博士後研究員  　　Postdoctoral researchers with a duration of one semester or more |
| **相關身分證明文件影本**  **Copies of Relevant Identification Documents** |  |
| **申請旁聽課程及課程流水碼**  **Course Name and Serial No.** | 1. Course Name:   Serial No. :   1. Course Name:   Serial No. : |
| **華語中心**  **Chinese Language Center** | **FOR OFFICIAL USE ONLY** |

文件編號CLC002

Document No. CLC002