

Language Center
National Yunlin University of Science & Technology
CHINESE CLASS APPLICATION FORM

國立雲林科技大學語言中心 華語課程申請表

English Name 英文姓名	Family Name	Given Name	Middle Name	Attach Recent Photo Here
Chinese Name 中文姓名		Nationality 國籍		
Date of Birth 生日	Month 月	Day 日	Year 年	
Gender 性別	<input type="checkbox"/> Male <input type="checkbox"/> Female 男 女	Present Occupation 現任職務		
Passport Number 護照號碼				
Permanent Address 居住地址				
Phone Number 本國電話		Fax Number E-mail		
Mailing Address if different from above 通訊地址				
Phone Number 通訊電話		Fax Number E-mail		

Highest Educational Background 最高學歷	學校名稱 Name of School _____ 主修科目 Major _____
Date of Graduation? 何時畢業?	Month 月 Day 日 Year 年
Have you ever studied Chinese before? 曾否學過中文?	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
How long have you studied? 學過多久?	
Where did you study? 在何處學?	
Did you study standard or simplified Characters? 所學是正體字或簡體字?	<input type="checkbox"/> Standard 正體 <input type="checkbox"/> Simplified 簡體 <input type="checkbox"/> Both 兩者
Did you study Pinyin, Yale or Mandarin Phonetic System? 所學音標是拼音、耶魯音或國語注音?	<input type="checkbox"/> Pinyin 拼音 <input type="checkbox"/> Yale 耶魯音標 <input type="checkbox"/> Mandarin Phonetic System 國語注音

What study material did you use? 學過何種教材? (Name of book 書名)	
What is your reason for planning to learn Mandarin? What level do you intend to reach and which is more important for you? Reading, Writing or Speaking? 學習中文之目的與計畫	

Relatives or friends in Taiwan 在台親友姓名：	
Name 姓名：_____	Relation 關係：_____
Occupation 職業：_____	Phone 電話：_____
Address 地址：_____	
Emergency contact in Taiwan or in your country 緊急時之聯絡人：	
Name 姓名：_____	Relation 關係：_____
Phone 電話：_____	Cell Phone 行動電話：_____
Address 地址：_____	

Application materials should include copies of the following 申請所需表件如下：
<input type="checkbox"/> Diploma / Degree / <u>Any certificate achieved in education</u> e.g. : High school / college / TESL 畢業證書
<input type="checkbox"/> HIV Test Result(within the past 6 months) 愛滋檢驗報告
<input type="checkbox"/> A copy of passport 護照影印本一份
<input type="checkbox"/> 3 photos (passport size) 三張照片

申請人簽名 Applicant's Signature: _____

日期 Date: _____ (month/day/year)

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 FAX: 886-5-5312058