

Application Form for Dr. Calvin Wang' s International Scholarship, Academic Year \_\_\_\_\_

申請人姓名 Name	(中 Chinese)	學號 Student ID No.	
	(英 English)	性別 Gender	<input type="checkbox"/> 男(Male) <input type="checkbox"/> 女(Female)
身份別 Student Category	<input type="checkbox"/> 陸生(China) <input type="checkbox"/> 僑生(Overseas Chinese) <input type="checkbox"/> 港澳生(Hong Kong & Macau) <input type="checkbox"/> 外籍生(International - Nationality) 國籍(Nationality):_____		
系級 Majoring	系(Department)  年級(Freshman/Sophomore/Junior/Senior/Master/Ph.D.)		
行動電話 Cell Phone No.		前學年學業成績平均 Academic Average Grade (previous semester)	
電子信箱 E-mail Address			
應繳文件 Required Documents	<input type="checkbox"/> 1.獎助學金申請書 (Application Form) <input type="checkbox"/> 2.證明經濟及財力有需要之文件 (Document for Proving the Financial Assistance) <input type="checkbox"/> 3.自傳(約五、六千字) (Autobiography, 500~600 words) <input type="checkbox"/> 4.推薦函三封(新生檢附) (Three Letters of Recommendation, applicable for the new incoming student) <input type="checkbox"/> 5.學生證影本 (Photocopy of Student ID Card) <input type="checkbox"/> 6.前一學年度成績單(舊生檢附) (Academic transcript of previous semester, applicable for the returning student)		
申請人簽名 Signature of Applicant	_____ 年(Year) 月(Month) 日(Day)		
資格審核 (Qualification evaluated) (此欄由審核單位填寫) To be filled out by the Review Committee	<input type="checkbox"/> 符合(Approved)  <input type="checkbox"/> 不符合(Declined)	核發金額 Fund approved	

申請程序:填寫申請書->檢附應繳文件->送學務處生活輔導組(收件彙整)->校友服務暨資源發展處召集「王冠川國際獎助學金小組」審核遴選->校友服務暨資源發展處資源發展中心依辦法核發->受獎生參加受獎儀式(每年11月擇一週六舉行)。

Application Procedure: Fill out application form -> Submit required documents -> Send to Life Counseling Division, Office of Student Affairs; to collect application materials) -> Call the meeting by Office of Alumni Services and Resource Development for "Dr. Calvin Wang' s International Scholarship Review Committee" to evaluate the application cases -> Issue fund by Office of Alumni Services and Resource Development -> **Scholarship recipients must attend the Scholarship Granting Ceremony (Held on a Saturday in November every year; failing to participate in the Ceremony will lead to declining of the Scholarship.)**

個人簡述(請述明家中狀況、家庭收支情形、本人就學情形及其他特殊需助學狀況等，約500~600字)  
(Autobiography, stating the family condition, incomes, study plan, and other special condition needing  
financial assistance; 500~600 words)：

導師或輔導教官意見Evaluation provided by Academic Advisor or Military Counselor：

簽名：\_\_\_\_\_

\*本家境狀況描述簡表裡所提之個人資訊，僅限本獎助學金委員參考用，  
請放心並據實填寫，謝謝。

# 中原大學\_\_學年度王冠川國際獎助學金申請書

## 家境現況描述簡表(學生填寫)

Application Form for Dr. Calvin Wang's International Scholarship, Academic Year \_\_\_\_\_  
(Form describing student's family condition (to be filled out by the student))

姓名 Name	系級 Department	學號 ID No.
項 Item	狀況(請勾選) Condition (please use the check mark "v" to indicate the applicable condition)	補充說明(佐證資料) Supplementary Remarks (together with the verification documents, if needed)
一、直系親屬狀況 Situation of direct relatives	父母雙亡Both parents are dead..... <input type="checkbox"/> 父亡Father is dead..... <input type="checkbox"/> 母亡Mother is dead..... <input type="checkbox"/> 父母離異Parents are devoiced..... <input type="checkbox"/> 祖父母扶養Raised by Grandparents..... <input type="checkbox"/> 雙親健在Parents are alive..... <input type="checkbox"/>	<input type="checkbox"/> 戶口名簿或戶籍謄本 Official Document for Relationship of the Members in the Family
二、家中經濟主要來源 家庭月收入概算(台幣) Family major source of income: NT\$ _____	自食其力半工半讀 Self-supported by student alone..... <input type="checkbox"/> 父親Father..... <input type="checkbox"/> 母親Mother..... <input type="checkbox"/> 單親半工半讀Single-parent family with self-support ... <input type="checkbox"/> 親戚資助Supported by grandparents or other relatives ... <input type="checkbox"/> 父母雙薪Double-income by the parents ..... <input type="checkbox"/>	<input type="checkbox"/> 綜合所得稅(父母) (Parent's) Tax return forms
三、個人或家庭健康狀況 Personal or family health condition	家人重病需長期治療者Family member with severe illness needed long-term treatments ..... <input type="checkbox"/> 家人身心障礙Family member with disorder(s)..... <input type="checkbox"/> 本人重病需長期治療Person with severe illness that needs long-term treatments ..... <input type="checkbox"/> 本人身心障礙Person with Physical and mental disorders <input type="checkbox"/> 半年內家人突逢重大變故Family member suffered severe incident within half a year..... <input type="checkbox"/> 半年內本人突逢重大變故Person suffered severe incident within half a year..... <input type="checkbox"/>	<input type="checkbox"/> 醫療診斷證明 Document of medical diagnosis <input type="checkbox"/> 身心障礙證明 Document of personal physical and mental disorders <input type="checkbox"/> 重大傷病證明 Document of severe illness <input type="checkbox"/> 其他證明 Other documents
四、旁系親屬狀況 Condition of other relatives	兄 人，就業中..... <input type="checkbox"/> 就學中..... <input type="checkbox"/> No. of elder brothers who are working __ <input type="checkbox"/> and who are in school __ <input type="checkbox"/> 姐 人，就業中..... <input type="checkbox"/> 就學中..... <input type="checkbox"/> No. of elder sisters who are working __ <input type="checkbox"/> and who are in school __ <input type="checkbox"/> 弟 人，就業中..... <input type="checkbox"/> 就學中..... <input type="checkbox"/> No. of younger brothers who are working __ <input type="checkbox"/> and who are in school __ <input type="checkbox"/> 妹 人，就業中..... <input type="checkbox"/> 就學中..... <input type="checkbox"/> No. of younger sisters who are working __ <input type="checkbox"/> and who are in school __ <input type="checkbox"/> 獨生子女 The only child ..... <input type="checkbox"/>	<input type="checkbox"/> 戶口名簿或戶籍謄本 Official document for Relationship of Members in the Family

<p>五、符合政府補助資格 For students meeting the requirements set by the government</p>	<p>低收入戶Low income family .....<input type="checkbox"/></p> <p>中低收入戶Medium-low income family .....<input type="checkbox"/></p> <p>清寒(村里長證明)Poor (please provide official document for verification purpose) .....<input type="checkbox"/></p> <p>身心障礙Physical and mental disorders .....<input type="checkbox"/></p> <p>其他(請於說明欄載明身分別) Others (please provide explanation in the “remarks” column).....<input type="checkbox"/></p>	<p><input type="checkbox"/>政府開立證明 Document issued by the government</p> <p><input type="checkbox"/>身心障礙證明 Document of physical and mental disorders</p> <p><input type="checkbox"/>村里長開立證明 Document issued by the local government</p>
<p>六、就學期間個人居住狀況 租屋月租金(台幣) During study at CYCU, the monthly rental expense is : NT\$_____</p>	<p>住學校宿舍Live in the dormitory of CYCU .....<input type="checkbox"/></p> <p>良善... <input type="checkbox"/> 恩慈... <input type="checkbox"/> 熱誠... <input type="checkbox"/> 信實... <input type="checkbox"/> 力行... <input type="checkbox"/></p> <p>借宿親戚家Live with a relative .....<input type="checkbox"/></p> <p>校外租屋Live in a rental place off-campus .....<input type="checkbox"/></p> <p>其他Other _____ .....<input type="checkbox"/></p>	<p><input type="checkbox"/>全國財產稅清單 Tax Return Forms</p>
<p>七、就學期間個人收入狀況 Personal income while attending CYCU</p>	<p>工讀台幣5000元/月以上 Income from work-study is above NT\$5,000/mon .....<input type="checkbox"/></p> <p>工讀台幣3000~5000元/月Income from work-study is between NT\$ 3,000 to 5,000/mon .....<input type="checkbox"/></p> <p>工讀台幣1000~3000元/月Income from work-study is between NT\$ 1,000 to 3,000/mon .....<input type="checkbox"/></p> <p>工讀台幣1000元/月以下Income from work-study is less than NT\$1,000/mon .....<input type="checkbox"/></p> <p>無法工讀(請於說明欄載明原因) Cannot take on the work-study (please state the reason) .....<input type="checkbox"/></p>	
<p>八、個人學費支付狀況 How the tuition fee was paid?</p>	<p>獎學金支付By scholarship .....<input type="checkbox"/></p> <p>親友借貸By loans from relatives or friends .....<input type="checkbox"/></p> <p>家人支付By family members .....<input type="checkbox"/></p> <p>自己支付By student alone .....<input type="checkbox"/></p>	<p><input type="checkbox"/>學雜費繳費證明 (Document of the payment of tuition fee)</p>
<p>九、本學期申請通過其他獎助學金 Other scholarship(s) applied in this semester</p>	<p>1. _____</p> <p>2. _____</p> <p>3. _____</p>	