|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **文藻外語大學學生校外實習報名表**  **Internship Application Form**  **（請以電腦編排，手寫不收 Please type）** | | | | | | | | | |
| 實習課程類型 Internship Type | | **□暑期（Summer）、□學期（Semester）、□學年（Academic Year）、**  **□其他Others：** | | | | | | | |
| 欲實習的機構  Name of Institution(s) Applied for | | 1. \_\_\_\_\_\_\_\_\_\_機構（Institution）\_\_\_\_\_\_\_\_\_部門（Dept.） 2. \_\_\_\_\_\_\_\_\_\_機構（Institution）\_\_\_\_\_\_\_\_\_部門（Dept.） 3. \_\_\_\_\_\_\_\_\_\_機構（Institution）\_\_\_\_\_\_\_\_\_部門（Dept.） | | | | | | 請黏貼近三個月之  二吋正面照片一張  Please attach a passport-size photo taken within the last  3 months | |
| 至多填寫3個機構/部門，即使是同一個機構不同部門，也算是一個志願。若無填寫清楚，將視實習機構之需要自行分派，不得有異議。Please select no more than 3 institutions or units you prefer. Without indicating your preference, the placement will be administered by this center. | | | | | | | |
| 中文姓名  Chinese Name |  | | | 英文姓名  English Name  （須與護照上姓名相同） | | |  | | |
| 身分證號碼  ID No. |  | | | 生日  Date of Birth | | | 西元 年 月 日  yy/mm/dd | | |
| 學號  Student No. |  | | | | | | | | |
| 學制/學系/  年級/班級  Division/Dept./  Year/Class |  | | | 電子信箱  Email | | |  | | |
| 手機 Mobile No. |  | | | 住家電話  Phone No. （H） | | |  | | |
| 住址Address | （現居 Present） | | | | | | | | |
| （永久 Permanent） | | | | | | | | |
| 語言能力證明文件（如：大專英檢/托福/多益證書）  Language Proficiency Certificate(s) | □英 語English  □附證明Certificate attached | | | | 歷年學業成績總平均  GPA | | | |  |
| □其他Other ：\_\_\_\_\_\_\_  □附證明 Certificate attached | | | | 歷年操行總平均  Conduct Point in Average | | | |  |
| 緊急聯絡人/關係  Emergency Contact /Relationship |  | | | | 緊急聯絡人電話  Phone No. | | | |  |
| 申請人簽名  Signature of Applicant | 本人已詳閱本期實習公告和工作內容，並同意遵守相關配合事項。  本人確認所提供資料均為真實且正確，若有不實資訊願依校規懲處。  I hereby declare that：  I have carefully read the terms of the internship announcement & the work duties, and agree to abide by them.  My declarations above are true and correct, otherwise, I shall be liable under the Regulations for Student Disciplines to a corresponding punishment.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ （本人簽名Signature）  \_\_\_\_年yy\_\_\_月mm\_\_\_日dd | | | | | | | | |
| 導師簽章Signature of Class Teacher |  | | 系主任簽章  或蓋本系戳章  Signature of Dept. Chair or Dept. Seal | | |  | | | |
| 個人資料蒐集同意書 Personal Data Collection Agreement  文藻外語大學（以下簡稱本校）為蒐集、處理、利用個人資料，依個人資料保護法之規定以本聲明及同 意書向您行書面告知並徵求您同意。當您於頁末簽名處簽署本同意書時，表示您已閱讀、瞭解並同意接 受本同意書之所有內容。 According to the Personal Data Protection Act, Wenzao Ursuline University of Languages (hereinafter as WZU) issues its statement of personal data protection and collection agreement to notify you of your responsibilities and rights and solicit your consent to the collection, processing and use of your personal data by WZU. Your signature below indicates that you have read, understood and accepted the contents set forth in this agreement. 一、基本資料之蒐集、更新及保管 (一)本校係依據中華民國「個人資料保護法」與相關法令之規範，蒐集、處理及利用您的個人資料、人 身保險及學生（員）(含畢、結業生)資料管理。 (二)請提供您本人正確、最新及完整的個人資料。 (三)本校因執行業務所蒐集您的個人資料包括表單內所需欄位等。 (四)若您的個人資料有任何異動，請主動向本校申請更正，使其保持正確、最新及完整。 (五)若您未提供真實且正確完整之個人資料，導致學生事務無法執行、緊急事件無法聯繫、考試成績無 法送達等，將影響個資當事人之權益。 (六)您可依中華民國「個人資料保護法」，就您的個人資料行使以下權利： 1.查詢或請求閱覽。 2.請求製給複製本。 3.請求補充或更正。 4.請求停止蒐集、處理或利用。 5.請求刪除。 行使上述權利時，須依本校規定驗證確認本人身份後提出申請。若委託他人辦理，須另出具委託書並同 時提供受託人身份證明文件以供核對。但本校各單位因執行職務或業務所必需者，本校得拒絕您上述之 請求。且因您行使上述權利，而導致權益受損時，本校將不負相關賠償責任。 I. Basic Data Collection, Renewal and Management (I)WZU will collect, process, and use your personal data, personal insurance and student academic record in accordance with the Personal Data Protection Act and relevant laws and rules enacted in Taiwan, the Republic of China. (II) Please provide your accurate, latest and complete personal data. (III)Your personal data collected by WZU to facilitate its administration includes the information in the columns marked as required on the form. (IV)Please inform WZU of any change to your personal data to maintain the latest information. (V)You may lose certain rights or benefits if you provide incorrect, untrue, outdated or incomplete information. (VI)According to the Personal Data Protection Act (ROC), you are entitled to make the following requests: 1. To check or review the collected data. 2. To receive a photocopy of the collected data. 3. To supplement or revise the collected data. 4. To cease the collection, processing or use of the collected data. 5. To delete the collected data. When exercising the above right, a candidate shall submit application after his/her identity has been verified in accordance with the regulations of this university. If an application is made by an entrusted person, a letter of authorization shall be submitted together with the identification document of the entrusted person for verification. However, WZU may reject your requests in order to meet the administrative needs of its offices and institutes. Moreover, should you suffer any losses due to such requests; WZU shall not be held responsible for any compensation. 二、蒐集個人資料之目的 (一)本校係基於「教育行政業務需求」之特定目的而蒐集您的個人資料。 (二)當您的個人資料使用方式與本校蒐集的目的不同時，我們會在使用前先徵求您的書面同意，您可以 拒絕向本校提供個人資料，但您可能因此喪失您的權益。 II. Purpose of Personal Data Collection (I)WZU collects your personal data to meet the needs of educational administration. (II)We will solicit your consent in a written form in advance before using your personal data to serve a purpose other than the one specified in Item (I) of this article. While you may refuse to provide your personal data to WZU, you may lose certain rights or benefits as a consequence. 三、個人資料利用之期間 除法令或中央事業主管單位另有個人資料保存期限外，以上開蒐集目的完成所需之期間為限，學生資料 將依文藻外語大學學則以及相關規定保存。 III. The period within which the personal data can be used Unless otherwise stipulated by the law or the central competent authority in respect of the retention period of personal information obtained from the holding of examination, the retention period of the personal information by the University shall be the time required for the above purposes for collection to be fulfilled. 四、個人資料利用之地區：台灣地區(包括澎湖、金門及馬祖等地區)。 IV. The area where the personal information is used：The Taiwan area (including Penghu, Kinmen and Matsu) or the regions agreed or authorized by you for information processing and use. 五、基本資料之保密：本校如違反「個人資料保護法」規定或因天災、事變或其他不可抗力所致者，致 您的個人資料被竊取、洩漏、竄改、遭其他侵害者，本校將於查明後以電話、信函、電子郵件或網站公 告等方法，擇適當方式通知您。 V. Basic Information Security Should your personal information be stolen, disclosed, altered or infringed upon due to the violation of the Personal Data Protection Act by WZU the occurrence of any natural disasters, incidental changes or other unavoidable circumstances, WZU shall inspect the cause and inform you by phone, mail, email or website notice. 四、同意書之效力 (一)當您簽署本同意書時，即表示您已閱讀、瞭解並同意本同意書之所有內容。 (二)本校保留隨時修改本同意書規範之權力，本校將於修改規範時，於本校網頁 (站)公告修改之事實， 不另作個別通知。如果您不同意修改的內容，請依上述第一條第六款向本校主張停止蒐集、處理及利用 個人資料。否則將視為您已同意並接受本同意書該等增訂或修改內容之拘束。 IV. Validity of Agreement (I)Your signature on this agreement indicates that you have read, understood and accepted its contents. (II)WZU is entitled to amend the contents of this agreement, and any amendments will be publicized on the WZU website. Should you disagree with any amendments, please exercise your right to request that WZU discontinue to collect, process or use your personal data according to Item VI of Article I. Otherwise, you are considered to have agreed to the amendment.  簽名 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  護照號碼 Passport number: \_\_\_\_\_\_\_\_\_\_  日期 Date of Signature(YYYY/MM/DD): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| **以下各欄請詳實撰寫，若未填寫恕不受理報名，各欄格式可延伸使用，以一頁為限。**  Please complete each of the following columns. Space can be extended up to one page in whole.  **《若有語檢證明或相關之學經歷，皆可一併附上並於左上角以訂書針裝訂》**  You may submit relevant documents to support your application, please staple your full set of application documents on the left upper side. | | | | | | | | | |
| **實習計畫 Anticipated Internship Experience**  (包含實習目的、實習內容、欲從實習中學習之技能等。 Please describe what kind of work and experience you envision performing.) | | | | | | | | | |
| **中英文自傳**  **Autobiography** | | | | | | | | | |
| **課外活動經驗/服務經驗**  **Extracurricular/Volunteer Experience** | | | | | | | | | |