**Yuan Ze University**

**YZU Outgoing Short-Term Study Abroad Scholarship Application Form**

**(Form A:** **Fill in by undertaking professor or secretary)**

Fill in Date：　　Y　　M　　D

|  |  |
| --- | --- |
| Program Name |  |
| Program Date | From |  | Y |  | M |  | D |  |  |  |
| Until |  |  |  |  |  |
| Program Destination |  |
| Number of Participant(including foreign student) |

|  |
| --- |
| Professor： person、Student： person、Administrative Staff： Person、Non YZU Personnel： person  |

 |
| Application Unit |  | Coordinator/ Extension |  |
| Purpose of Program |  |
| Program Context (including schedule) |  |
| Program Features (500 words and above) |
|  |
| List of Participating Students including foreign students |
| Name | Student ID | Gender | Department | Citizenship | Amount of Scholarship |
| Global Affairs Office | Department |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Total |  |  |
| Fill in by Review Unit | **□ Approved****□ Reject (Not Approved)****□ Other Opinion** **※Attached are the minutes of the department/institute review meeting.** | **Application（Department）** |
|  |
| **□ Approved****□ Reject (Not Approved)****□ Other Opinion**  | **Application（College）** |
|  |
| **□ Approved****□ Reject (Not Approved)****□ Other Opinion** Approved an appropriation of NTD \_\_\_\_\_\_ | **Review and Approval Unit****(Global Affairs Office)** |
|  |

**Yuan Ze University**

**Affidavit of Outgoing Short-Term Study Abroad Scholarship and Parent Consent (Form B: Fill in by student)**

I understand that signing this affidavit, I agree that the Global Affairs Office of Yuan Ze University may collect, acquire, and use the personal application and award-related information provided by me for the purpose of carrying out their duties.

I have read, understood, and agreed to the regulations of the **Yuan Ze University Study Abroad Scholarship**. I have also agreed to the provision that applying for multiple scholarships within the same academic year will result in automatic disqualification. I promise that all the information provided in my scholarship application is true. I will not engage in any behavior that would tarnish the university's reputation during my exchange/program/study period. I understand and agree that I must fulfil the required credits during my exchange/program/study period according to the university's standards for passing. I further understand and agree that any violation of the regulations mentioned above will immediately cancel my participation in this scholarship program.

**Student :             (Signature)**

**Student ID :**

**ID/ ARC :**

**Parental Consent**

※As per Personal Data Protection Law, the information in this form will only be used for this activity.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Student ID |  | Name |  | Sex | □M □F □Other |
| Date of Birth |  | ID/ ARC |  | Cellphone No. |  |
| Precautions or diseases of particular concern： |

□It is my agreement that my children will take part in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ activities of the \_\_\_\_\_\_\_\_\_ Department of Yuan Ze University and that they will adhere to the safety and activity regulations.

**Parent Cellphone Number：**

**Signature of Parent：**

**Republic of China (Taiwan) Y M D**

**Yuan Ze University**

**YZU Outgoing Short-Term Study Abroad Scholarship Application Form**

**(Form C: Fill in by student)**

Fill in Date： Y M D

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Department |  |
| Student ID |  | Gender |  |
| Host university/ Country |  | Exchange Date(Actual Departure and Return Arrival Date) |  |
| **Did you previously receive this scholarship? ☐ No ☐ Yes The following information needs to be provided**Received this scholarship in \_\_\_\_\_Academic Year \_\_\_\_ Semester Amount NTD\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\*Long-term (double-degree, exchange, winter/summer school) and short-term (overseas study visits, research, and training) are included in this scholarship. |
| Expected Outcome | 1. Personal study plan in joining this exchange program
2. Doubts and questions intended to be raised in this exchange program
 |

**Yuan Ze University**

**Report of Outgoing Short-Term Study Abroad Scholarship**

**(Form D: Fill in by student)**

Fill in Date： Y M D

|  |  |
| --- | --- |
| Project ID/ Title | **（Fill in by Approval Unit）** |
| Name |  | Department |  |
| Student ID |  | Gender |  |
| Host university/ Country |  | Exchange Date (Actual Department and Return Arrival Date) |  |
| Experience Report | 1.What prompted you to participate in this exchange program?2.Brief introduction of the host university and exchange destination3.Exchange experience in host university (in-class)4. Exchange experience in host university (extracurricular and daily life)5.Concreate exchange benefits6.Suggestions and thoughts※The report must contain at least five photos of the activity and at least 800 words. |
| Activity Photos （Provide at least five JPG images with a resolution of 300 dpi or higher, along with a description within 30 characters）  |
| (Insert photo) | (Insert photo) |
| (Insert description) | (Insert description) |
| (Insert photo) | (Insert photo) |
| (Insert description) | (Insert description) |
| (Insert photo) | (Insert photo) |
| (Insert description) | (Insert description) |
| **Signature of Student** |  | **Signature of Undertaking Professor** |  | **Signature of Project Host** |  |

**Yuan Ze University**

**Report on Exchange Program**

**(Form E: Fill in by undertaking professor or secretary)**

|  |  |
| --- | --- |
| Fill in Date： Y M D | Coordinator：  |
| Project ID/ Title | （Fill in by Approval Unit） |
| UndertakingDepartment/ Unit |  |
| Program Name |  |
| Presenter |  |
| Program Date | From |  | Y |  | M |  | D |  |  |  |
| Until |  |  |  |  |  |
| ProgramDestination |  |
| Number ofParticipant(including foreignstudent) | Professor： person、Student： person、Administrative Staff： Person、Non YZU Personnel： person |
| Program Coordinator |  | Extension |  |
| Purpose of Program |  |
| Program Context |  |
| **Program Features（500 words and above）** |
|  |
| **Activity Photos**（Provide at least five JPG images with a resolution of 300 dpi or higher, along with a description within 30 characters） |
| (Insert photo) | (Insert photo) |
| (Insert description) | (Insert description) |
| (Insert photo) | (Insert photo) |
| (Insert description) | (Insert description) |
| (Insert photo) | (Insert photo) |
| (Insert description) | (Insert description) |
| **Questionnaire Result and Implementation Outcomes** |
| **Questionnaire Analysis**（Form content can be adjusted according to survey questions）Distributed questionnaires： 、Questionnaires with valid responses：

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  Questionnaires **(Total\_\_\_\_)** Survey of satisfaction | Strongly agree | Agree | Average | Disagree | Strongly disagree |
| 1. This event was overall very satisfying to me
 |  |  |  |  |  |
| 1. This activity is helpful to me / can strengthen my skills
 |  |  |  |  |  |
| 1. Looking forward to attending again next time or recommending others to attend
 |  |  |  |  |  |
| 1. Actual content matches the program context
 |  |  |  |  |  |
| 1. The attendees are highly engaged
 |  |  |  |  |  |
| 1. Smooth flow of events
 |  |  |  |  |  |
| 1. The schedule of activities is appropriate
 |  |  |  |  |  |
| 1. The location is convenient
 |  |  |  |  |  |
| **Other opinion and suggestions（Please list-out）：** |

**Implementation Outcomes**

|  |
| --- |
|  |

 |
| Related Documents | (Agendas, methods, manuals, registration forms, sign-in sheets, handouts, promotional DM,promotional posters, related websites, briefings, audio-visual materials, etc.) |
| Remarks | 1. Within 2 weeks after the program is held, email the "Report on Exchange Program", theoriginal photo file, and all attachments to the review unit coordinator.2. The contents of each item on this form must be filled in carefully. |