**國立中興大學農業暨自然資源學院**

**ESAP/EMI課程計畫助理補助申請表**

**ESAP/EMI Course Assistant Application Form**

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|  **課程資料Course Details** |
| 開課單位Offered Department |  | 學年期Academic year/Semester |  學年度 第 學期 |
| 課程代碼Class Number |  | 課程類型Course Type | □ ESAP □ EMI |
| 課程名稱Course Name |  |

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|  **申請補助學生 Applicant** |
| 系所/年級Department/Grade |  | 學號Student ID |  |
| 姓名Full name |  |
| 連絡電話Cell phone Number |  | 電子郵件E-mail |  |
| (International student) Please attach a copy of the ARC and a copy of the work permit.□本學期無領取本校各單位TA補助。I have not received the TA scholarship from any units of the University this semester. □本學期有領取本校其他單位TA補助(包含教務處、國際處、通識中心及系所)。This semester, I received the TA scholarship from other units of the University, such as the Office of International Affairs, the Office of Academic Affairs, the General Education Center, the Institutes, and the departments. (課號Class Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)* 已領取本校其他單位TA補助之同學，需與各單位確認聘期無衝突始得聘任。如於申請後接獲其他單位補助通知，應主動告知農資學院。

Students who have received TA scholarships from other units of the University must confirm with the units that there are no conflicts. If receiving TA scholarships from other units after submitting this application, the applicant must proactively notify the College of Agriculture and Natural Resources.* 同一門課程該學期如已獲其他單位補助，不得再重複領取本辦法補助。

Each course can only receive funding once per semester from the University units.* 農資學院於彙整補助名單後提供國際處及教務處備查，如查證重複申請，取消補助資格，原補助經費應繳回，且兩年內不得再申請本補助辦法。

The College of Agriculture and Natural Resources will share the information you provide with the Office of International Affairs and the Office of Academic Affairs for verification. If duplicate applications are found, the subsidy will be revoked, and the funds must be returned. Additionally, you will be disqualified from applying for this subsidy for the next two years.  |
| 授課教師簽名 Instructor Signature | 日期Date：　　　年Y　　月M　　日D |

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| **Please attach a copy of the ARC (international student)** |
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| **Please attach a copy of the work permit (international student)** |
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| 課程計畫助理協助課程教學計畫Course Assistant Assistance Plan  |
| (請授課教師協助填寫) |
| 授課教師簽章Instructor’s Signature | 日期Date：　　年Y　　月M　　日D |