**國立陽明交通大學雙語教育與學習推動辦公室**

**EMI補充課程補助申請表**

Office of Bilingual Education, **National Yang Ming Chiao Tung University  
Subsidy Application Form for EMI Supplementary Classes**

申請日期(Application Date)： 年(Year) 月(Month) 日(Date) 112.09版 (Sep. 2023)

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| **申請人**  **Applicant** | **□** 授課老師 course instructor **□** 系所 Dept./Insti.  **□** 大學生 Undergraduate student | | | | | |
| **EM課程名稱 EMI course** |  | | **當期課號**  **Course number** | |  | |
| **開課單位**  **Course offering dept.** |  | | **授課老師 Lecturer** | |  | |
| **補充教學**  **開課助教**  **Teaching assistant (TA)for supplementary classes** | **姓名(Name)：**  **學號(Student ID)：** | | **帳號(擇一填寫)**  **Bank account (Choose one)** | | **□郵局(Chunghwa Post)：**  **□玉山(E-Sun Bank)：** | |
| **預計上課人數estimated number of students** |  | | **系所/教師**  **推薦Recommendation by department/ course instructor** | |  | |
| **預計**  **上課時間scheduled class time** |  | | **週數/每週次數/每次時數 (Number of weeks/ Number of classes per week/ Number of hours per class):\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_月份實施總時數:\_\_\_\_\_\_\_\_小時**  **(In the month of \_\_\_\_\_\_\_, total hours of classes are \_\_)** | | | |
| **課程內容說明:**  **Description of the classes** | | | | | | |
| 1. **補充教學**   **開課助教簽名**  **TA’s signature** | |  | | 1. **授課教師簽名**   **Course Instructor’s signature** | |  |
| 1. **開課單位主管**   **Head of the course offering dept.** | |  | | | | |
| 1. **雙語教育與學習推 動辦公室 審核**   **Review by Office of Bilingual Education** | |  | | **（5)雙語教育學習推動辦公室 執行長**  **CEO, Office of Bilingual Education** | |  |
| **審查結果**  **Result of review** | |  | | | | |

* 本表請於開課後第三周起至第八周前將本申請表繳交至本辦公室。

Please submit this form to the Office of Bilingual Education between the third and the eighth week in the semester.

* 每堂課程結束後，需繳交課程紀錄表、學生簽到表及學生回饋單，並送至雙語教育與學習辦公室存查。

After each supplementary class, please submit the course record form, student sign-in sheet, and student feedback sheet to the Office of Bilingual Education for reference.