中國醫藥大學中文成績申請單(畢業/肄業校友專用)

China Medical University Application Form for Chinese Academic Record (For graduated or deferred alumni)

系(所)別	□目 (Daytime Class)
Department	
(Graduate Institute)	
姓名	
Name	
學號	□附排名(Academic Ranking)
Student Number	The treatment runking)
入學年月	+ (II)
Date of Enrollment	年(Y) 月(M)
(Y / M)	
畢業/肄業年月	
Graduated /Deferred Date	年(Y) 月(M)
(Y/M/D)	
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Contact Number	
附註 Remark(s)	1.大學部承辦窗口:註冊課務組 Unit(s) in Charge: Registration and Curriculum Division 2.現場申請者:請至出納組繳交工本費,持繳費收據及申請單向教務處申請。For those who apply in person, please submit your application fee to the Office of the Cashier, and apply at the Office of Academic Affairs with your receipt and application form. 3.郵寄申請者:請填寫本申請單,連同工本費及貼足郵資之回郵信封,掛號寄到:406040 台中市北屯區經貿路一段 100 號中國醫藥大學教務處收。For those who apply by mail, please fill out the application form and send the application form along with the application fee and a self-addressed stamped envelope to: Office of Academic Affairs, China Medical University No. 100, Sec. 1, Jingmao Rd., Beitun Dist., Taichung City 406040, Taiwan R.O.C. 4.如回郵信封之郵資不敷支應郵件實際的重量,本處將改成足以支應郵件重量之類別。In case of insufficient postage, the document will be mailed out using a service which the included postage allows. 5.逾期三個月未領取者,視同作廢。The transcript will be disposed of
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