

附件一

外交部臺灣獎學金申請表(範例)

APPLICATION FORM FOR THE MOFA TAIWAN SCHOLARSHIP

Applicants should fill out this application form clearly and accurately. Detailed answers are required in order to make the most appropriate arrangements. If necessary, additional pages of the same size may be attached. 本表請申請人詳實工整填寫，慎勿遺漏，以利配合作業，如有需要，申請人可自行以同款紙張加頁說明。

Please check: 請選以下選項

Which type of scholarship are you applying for?

☐ Undergraduate Scholarship 大學獎學金

☐ Master Scholarship 碩士獎學金

☐ Doctoral Scholarship 博士獎學金

Do you need to attend a Mandarin Language Enrichment Program (this must be undertaken during the first year) (是否先修華語？華語課程必須在抵臺第一年研修)? ☐ Yes ☐ No If Yes, please fill in the name of the language center in part 6 on page 4

1. Personal information 個人基本資料

a. Name 姓名	Title 稱謂: Mr./Mrs./Ms. MR. Surname (Last name) 姓: OLANREWAJU Given Name(s) 名: AFEEZ, BOLAJI	Please attach a recent photograph (taken within the last 3 months). 最近三個月相片
b. City and country of birth 出生城市及國別	LAGOS	NIGERIA
c. Nationality 國籍	*Note: If one or both of your parents was an ROC national at the time of your birth, you are also an ROC national and therefore not eligible to apply.	
d. Parents 家長資料	Father 父	Mother 母
	Name 姓名: Olanrewaju Taofeek Nationality 國籍: NIGERIA Place of birth 出生地: NIGERIA	Name 姓名: Morenigbade Kudirat Nationality 國籍: NIGERIA Place of birth 出生地: NIGERIA

e. Contact information 聯絡地址、電話、電子郵件	Permanent address 永久地址: 02, ROJU AVENUE, OJOTA, LAGOS. Mailing address (if different from above) 郵寄地址: Telephone 電話: 07042280970 Email 電子郵件:afeezbolajiola@gmail.com Cell phone 手機:08145422427
f. Sex 性別	<input type="checkbox"/> Male 男 <input type="checkbox"/> Female 女
g. Marital status 婚姻狀況	<input type="checkbox"/> Single 單身 <input type="checkbox"/> Married 已婚
h. Date of birth 生日	(Day 日 / Month 月 / Year 年):30/01/2002
i. Have you ever resided in Taiwan? 居住臺灣	<input type="checkbox"/> Never 否; <input type="checkbox"/> Yes, from (dd/mm/yr) to (dd/mm/yr).是 · 起迄日期
j. Have you received a Taiwan Scholarship or Huayu Enrichment Scholarship before? 臺灣獎學金/華語文獎學金受獎紀錄	<input type="checkbox"/> No 無; <input type="checkbox"/> Yes, from (dd/mm/yr) to (dd/mm/yr);是 · 起迄日期 Type(s) of Scholarship:
k. Health condition 健康狀況	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair
l. Chronic diseases 慢性病	<input type="checkbox"/> None 無 <input type="checkbox"/> Yes 有 Please specify 請指明:
m. Contact person in case of emergency 緊急事件聯絡人	Name 姓名:MORENIGBADE ADESINAR Relationship 關係:UNCLE Address 地址:02, ROJU AVENUE, OJOTA, LAGOS Telephone 電話:08125648668 Email 電子郵件:sinamoreni@gmail.com Cell phone 手機:

2. Language proficiency 語言能力

Language proficiency 語言能力	Comprehension 聽			Reading 讀			Writing 寫			Speaking 說		
	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可	Excellent 優	Good 良	Fair 可
Chinese												
English												
(Other, please state)												

3. Education and training 教育背景

Note: Highest diploma only

School name 學校名稱	Subject 研修領域	Qualification (Certificate/Diploma/ Degree) 資格	Country and place 地點	Year obtained 取得證書時間
Ojota Senior secondary school		High School Diploma	Nigeria, Lagos	2019

4. References 推薦單位 (人) 資料

Name 姓名	Position 職務	Telephone, email or mailing address 電話及電郵地址

5. Employment/Job experience (use one row for each position) 工作經歷

Position 職務	Company/Organization 機構名稱	Period of employment 服務期間	Responsibilities 工作說明

6. Language center and/or university/department which you plan to attend in Taiwan 擬就讀之語文
中心或/及大學校院系所

University affiliated language center:

University/college and department: DEPARTMENT OF COMPUTER SCIENCE AND INFORMATION
ENGINEERING.

7. RECOMMENDATIONS OF LOCAL AUTHORITY OR ORGANIZATION (e.g. Government Agency, Educational Institute, Think Tank, International Organization, Non-governmental Organization) 駐地推薦單位：如駐在國政府機關、教育或研究機構、智庫或非政府組織

Comments on applicant:

Responsible official: Title_____ **Signature:**_____

Name:_____ **Date:**_____

8. Please briefly state your study plan while in Taiwan 請簡述在臺讀書計畫

9. DECLARATION: I hereby declare that:

- ☐ The information I have provided in this document is true and accurate. I understand that any false information will disqualify me from the program, even if it is already in progress.
- ☐ I am not suffering from any serious disease and am not hindered by any illness or disability.
- ☐ I am neither an ROC national, nor an overseas compatriot of the ROC.
- ☐ I am not currently undertaking studies in Taiwan at the same educational level as the scholarship type for which I am applying.
- ☐ I am not applying for this scholarship as an exchange student through an agreement signed between an educational institution in Taiwan and an educational institution outside of Taiwan.
- ☐ I consent to the information provided in this application form being made available to ROC government agencies for scholarship-related matters once I become a Taiwan Scholarship recipient.

Applicant's signature

Date

____ / ____ / ____

Day 日 / Month 月 / Year 年