***National Pingtung University of Science and Technology***

***Application Form for***

***Intensive Training Course for African Elites 2024***

(*This form should be typed in English; not handwritten*)

1. **Personal Information**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. Name | First name:  Middle name:  Family name:  Name in Chinese (if applicable): | | | | | | | | | | With one passport sized color photo Attached | | |
| 2. Contact Information (Apply to Phone Interview) | Home Address (Permanent): Mailing Address:  E-mail:  Tel (home): (country code) Tel (mobile): (country code) | | | | | | | | | | | | |
| 3. Nationality | Country:  Official Language: | | | | | | | | | | | | |
| 4. English Proficiency (please  in the appropriate boxes) | Listening | | | Reading | | | Writing | | | | Speaking | | |
| Excellent | Good | Fair | Excellent | Good | Fair | Excellent | Good | Fair | | Excellent | Good | Fair |
|  |  |  |  |  |  |  |  |  | |  |  |  |
| 5. Date of Birth | (DD/MM/YYYY) | | | | | | | | | | | | |
| 6. Gender | □Male □Female | | | | 7. Marital Status | | | | | □Single □Married | | | |
| 8. Religion |  | | | | 9. Health Condition | | | | |  | | | |
| 10. Chronic Disease | □No □Yes If yes, please specify | | | | | | | | | | | | |
| 11. Dietary Restriction | □No □Yes If yes, please specify | | | | | | | | | | | | |
| 12. Contact Person in Emergency | Name: Relationship: Address:  Tel:  E-mail: | | | | | | | | | | | | |

1. **Present Employment**

|  |  |  |
| --- | --- | --- |
| 1. Designation/Title |  | Month Year  Since / |
| 2. Institute/Organization |  | |
| 3. Type of Business |  | |
| 4. Address | Tel: Fax: | |
| 5. Type of the Organization | □Govt. Ministry/ Agency □University/ Institution  □Govt./ State Owned Enterprise □Locally Owned Enterprise  □Joint Venture □Foreign Owned  □Enterprise □NGO | |
| 6. Present Job Duties |  | |

1. **Previous Working Experience**

|  |  |  |  |
| --- | --- | --- | --- |
| Designation/ Title | Organization | Period of Employment | Job Duties |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. **Education and Training**

**Note: Highest Diploma Only**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Qualifications | | Department | School Name | Country | Year Obtained (Christian era) |
| □High School  □Bachelor  □Master  □Other: | |  |  |  |  |
|  |  |

-------------------- Please insert the recommendation letters after this page-----------------

1. **Brief Introduction**
   * Please tell us about your current work, the difficulties, regarding agriculture or animal husbandry, you have had, and what do you want to learn from this training course. (Word limit: 500 words in typing)

**Letter of Declaration**

1. I hereby declare that the information and documents as provided by me in the application form are true and accurate. I understand and accept that any false declaration of information on my part will disqualify me from the program, even when it is in progress.
2. I declare that I am not suffering from any serious or chronic disease and that I am not hindered in the performance of my duties by any illness or disability.
3. I hereby undertake to abide by the laws of the Republic of China during my stay in Taiwan and undertake to do the following:
   1. Fulfill due performance as required in attendance.
   2. Not seek employment or engage in any political activities.
   3. Bear any additional expenses or risks incurred as a result of any changes initiated by myself.
4. I fully agree that the NPUST has the right to terminate the scholarship if, during my stay in Taiwan, my behavior causes any difficulties for the management of the NPUST or the training institution.
5. I understand that during my stay in Taiwan, only those matters related to the training program will be settled in accordance with the Taiwanese/ NPUST’s rules and regulations, and that the Taiwanese/ NPUST’s decision will be final and will be implemented accordingly. Cases irrelevant to the training program shall be otherwise of my own responsibilities and at my own cost.

Name: (Printed)

(Signature) Date: (DD/MM/YYYY)

**Attachments Check List**

|  |  |  |
| --- | --- | --- |
| **Check** | **Items** | **Remarks** |
|  | Application Form | With one passport sized color photo Attached |
|  | Copy of highest educational level’s Diploma or Degree |  |
|  | Copy of a Certificate of English  language proficiency (e.g. TOEFL, IELTS, TOEIC) |  |
|  | Passport Copy | Submit a copy of the page(s) showing your name, photo, and passport number, passport must be valid at least 6 months  before your arrival. |
|  | Letter of Declaration |  |