

國立中山大學 研究生 轉系所申請單

National Sun Yat-sen University

Application Form for Master Degree Students' Change of Department/Institute

申請學年度: _____ 學年度

申請日期 Application date: _____ 年 _____ 月 _____ 日

Intended transfer year: _____ academic year

108.02.01 修正 02/01/18 revised

姓名 Name			學號 Student ID		
原屬院系(所)級 Current department/college	學院 college _____ 學系 (研究所) _____ 年級 department (master's degree) _____ year				
學制別 Level	<input type="checkbox"/> 碩士班 <input type="checkbox"/> 博士班 <input type="checkbox"/> Master's degree <input type="checkbox"/> Ph.D program		身分別 Types of student status	<input type="checkbox"/> 一般生 Standard <input type="checkbox"/> 其他 Other: _____ (請參閱附註三) (Please see attachment 3)	
擬轉院系(所)級 Intended transfer college/department	擬申請轉入 _____ 學院 _____ 學系 (研究所) _____ 年級 Intend to transfer to _____ college _____ and department (post-graduate degree) _____ year				
申請轉系(所)原因 Reasons for transfer					
申請人 Applicant	(簽章) (Signature)		連絡電話 Telephone No.	手機 Mobile:	研究室 Office:
				電話(H) Home:	
上列資料由申請同學詳實填具並送所屬系所主管及院長簽核後連同審查資料送註冊課務組彙辦 All information listed above must be accurately completed by the applicant before submitting to the heads of the current department and the college for approval, followed by submitting all required documents to the Registration and Curriculum Division					
原屬院系(所) 審查意見 Comments from the current department/college	指導教授 Advising Professor	系所主管 Department Supervisor	院長 Head of the College		
	審查意見: Assessment decision <input type="checkbox"/> 同意 approve <input type="checkbox"/> 不同意 disapprove 其他意見: Other comments:	審查意見: Assessment decision <input type="checkbox"/> 同意 Approve <input type="checkbox"/> 不同意 Disapprove 其他意見: Other comments:			
教務處初審 Office of Academic Affairs Initial assessment	<input type="checkbox"/> 符合 Qualified <input type="checkbox"/> 不符合 Not Qualified 承辦人: _____ 組長: _____ Coordinator: _____ Head of the Office: _____				
擬轉院系(所) 審查意見 Comments from the intended transfer department/college	系所主管 Department Supervisor		院長 Head of the college		
	審查結果: 經 _____ 年 _____ 月 _____ 日 系所務會議或系所招生相關之委員會會議審查 (附會議紀錄) Assessment result: Decision was made at _____ departmental meeting or committee relevant to department enrollment, (with meeting minutes) <input type="checkbox"/> 同意 <input type="checkbox"/> 不同意 <input type="checkbox"/> approve <input type="checkbox"/> disapprove				

附註：

- 一、 研究生申請轉系，須填具申請單，並附歷年成績單及有助轉系所之相關審查資料，以便審查。
- 二、 研究生得於修業滿一學期申請轉系所（休學不計入年限）；教務處初審不符規定者，申請單將交由所屬系所退還申請者。
- 三、 身份別除一般生外，依入學身份分為在職生、僑生、外國學生等，請確實填寫身分別，俾便審查。
- 四、 受各種入學方式之規定有轉系所限制者，依其規定辦理。

- Notes :
1. For post-graduate degree students who intend to apply for a department transfer, an application form must be completed and submitted along with non-current academic transcripts and any documents that may support the application.
 2. For post-graduate degree students, department transfer applicants must finish a full semester (excluding the time of withdraw from studies); application form will be returned to the unqualified applicant via his/her current department office depending on the result of the initial assessment made by the Office of Academic Affairs.
 3. Types of student status are: on-job students, overseas Chinese students and overseas students. Please complete all required fields accurately for assessment purposes.
 4. Specific rules and requirements may apply to some courses for course transfer purpose. All rules and requirements will be followed accordingly.