

Written Qualifying Examination Application Form
Ph.D. Program in Seismology, Earth, and Environmental Sciences
National Chung Cheng University

Approved by the 9th departmental meeting in the 111-th academic year

Name		Student ID			
Exam date/time	(Y/M/D) at (H) (M) (pm/am)				
Exam location	Seismology Building Room No. _____ in CCU				
List of the Doctoral Advisory Committee (Three to five members, with at least one-third (inclusive) outside the department)	Name	Affiliation	Job Title	Highest education (including school name and degree)	Affiliated with our department (Y/N)
Exam format (filled by the PhD Advisory Committee)					

Applicant signature:

Application date: (Y/M/D)

Advisor:

Staff:

Department chair:

國立中正大學地球與環境科學系地震學暨地球與環境科學博士班
資格考筆試申請表

111 學年第 9 次系務會議通過

姓 名		學 號			
筆試時間					
筆試地點					
博士指導委員 名冊(三至五 人，系外委員 須達總人數三 分之一含以 上)	姓名	服務學校或單位	職稱	最高學歷 (含畢業學校及學位)	所內 / 所外
考試方式 (博士指導委員 會填寫)					

申請人簽章：

申請日：民國 年 月 日

擬請 惠准同意進行博士班研究生資格考筆試
敬陳

指導教授：

承辦人：

系所主管：