**附件 1**

**113學年度****戀念臺灣-海外僑民兒童或少年至校短期體驗學生資料表**

Student Information Form for the 2024 Nostalgia for Taiwan Short-term In-school Experiential Study Program for Overseas Compatriot Children and Adolescents

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| 體驗學校Host School | |  | | | | | | 報到序號Registration Number | | | | |  | | |
| 體驗者姓名/國籍  Participant’s Name / Nationality | |  | | | | | | 體驗者性別/年齡  Participant’s Gender//Age | | | | |  | | |
| 居住於志願體驗學校  同一縣市者為原則  在臺緊急聯絡人  Contact Person in Taiwan | | 姓名Name：  住家Home：  手機Mobile(體驗者在校期間，可即時聯繫的電話)：  電郵Email：  LINE ID(可不提供)：  關係Relationship： | | | | | | | | | | | | | |
| 體驗學生中文程度  Participant’s Chinese Proficiency | | 聽Listening □不擅長Poor　□基礎Basic　□普通Fair　□流利Excellent　□精通Native  說Speaking □不擅長Poor　□基礎Basic　□普通Fair　□流利Excellent　□精通Native  讀Reading □不擅長Poor　□基礎Basic　□普通Fair　□流利Excellent　□精通Native  寫Writing □不擅長Poor　□基礎Basic　□普通Fair　□流利Excellent　□精通Native | | | | | | | | | | | | | |
| 體驗期間  Experiential Duration | | 自 年 月 日 至 年 月 日  From Year Month Day To Year Month Day | | | | | | | | | | | | | |
| 肖像授權同意書  The Agreement regarding the Right to Publicity for Participation in the School | | □同 意Approval  □不同意 Disapproval | | | | | | | | | | | | | |
| 特殊需求及注意事項  Special needs and considerations | |  | | | | | | | | | | | | | |
| □本人已核對以上資料無誤I have verified the above information is correct.  註1.資訊如果有誤，請直接修正並回傳。If there is any incorrect information, please make the necessary corrections and return it.  註2.請於113年8月30日前，以電子郵件或傳真回傳接待學校並以電話確認；未於期限內回傳，視同放棄。  Please return this information form to the host school by email or fax before 8/30/2024 and confirm by phone. Failure to complete this process within the specified time will result in forfeiture of the right to participate in the experiential study program.  註3.凡申請本計畫者，即表示同意將申請人資料提供予僑委會、國教署及接待學校之用。  Applicants for this program hereby agree to provide their personal information to the OCAC, K12EA and the host schools for the purposes of application. | | | | | | | | | | | | | | | |
| **以下由學校填寫Below to be filled in by the school (not to be filled in by parents)** | | | | | | | | | | | | | | | |
| 學生必繳文件Documents to Be Submitted by the Participant | | □護照影本**Photocopy of passport**  □投保證明**Proof of Insurance** (保險期間自 年 月 日至 年 月 日  Period of insurance: From \_\_\_\_\_/\_\_\_\_\_/ to\_\_\_\_\_/\_\_\_\_\_/ ) | | | | | | | | | | | | | |
| 體驗班級 | | 年 班 | | | | | 導師簽名 | | | | |  | | | |
| 體驗班級  任課教師 | | **科目** | 任課教師 | | 簽名 | | | | **科目** | | 任課老師 | | | | 簽名 |
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| 教務處 | | | | | | 學務處 | | | | | | | | 校長 | |
| 註冊組 | 教學組 | | | 主任 | | 生教組 | | | | 主任 | | | |  | |
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