

National Chengchi University
 Department of Chinese Literature
 2019 Academic Year Second Semester

Please attach
 one photo
 (approx. 3.5
 cm X 4.5 cm
 in size)

Candidate Basic Information Form

Name		Academic Expertise	
Gender		Birth Date	Year Month Date
Contact Address			
Contact Phone Number	(Home) (Office) (Mobile)		
Email Address			
Position Applied	<input type="checkbox"/> Chinese Philology <input type="checkbox"/> Chinese Thought <input type="checkbox"/> Chinese Literature		
Level	<input type="checkbox"/> Professor <input type="checkbox"/> Associate Professor <input type="checkbox"/> Assistant Professor		
Education Background	(School and Department) PhD : From: To: Master's : From: To: Bachelor's : From: To:		
Qualifications	Between October 25, 2014 through October 24, 2019: <input type="checkbox"/> Ministry of Science and Technology, R.O.C., Grant Proposal(s) (finished) or paper(s) formally reviewed and accepted for publication, two in total (must attach proof of review and publication); or <input type="checkbox"/> One book formally reviewed and accepted for publication (must attach proof of review and affidavit of publication) Please attach proof for choice selected above.		
Current Teaching or Research Position			
Experience			
Diploma Number	PhD Degree Diploma Number :		
Teacher's Certificate Number	Professorial Certificate Number :		
Representative	Name of publication and/or dissertation:		

<p>work : Representative work within the past three years (limited to one work most representative in the area of academic expertise applied above; please note time and place of publication.)</p>	<p>Time of publication (must be between October 25, 2016 through October 24, 2019): published in Year <input type="checkbox"/><input type="checkbox"/> Month <input type="checkbox"/><input type="checkbox"/> Place of publication:</p>
<p>Reference Works: Within the past five years, they must be related to the area of academic expertise applied above.</p>	<p>Reference works below must be published between October 25, 2014 and October 24, 2019; please list in the order of publishing dates, from the latest to the earliest. (If more space is needed, please attach separate pages but follow the format below.)</p> <p>Book(s): Published in Year <input type="checkbox"/><input type="checkbox"/> Month <input type="checkbox"/><input type="checkbox"/>, Place of Publication:</p> <p>Chapter(s)/Article(s) in Books : Published in Year <input type="checkbox"/><input type="checkbox"/> Month <input type="checkbox"/><input type="checkbox"/>, Place of Publication:</p> <p>Paper(s) in Periodical(s): Published in Year <input type="checkbox"/><input type="checkbox"/> Month <input type="checkbox"/><input type="checkbox"/>, Place of Publication:</p> <p>Paper(s) in Seminar(s): Published in Year <input type="checkbox"/><input type="checkbox"/> Month <input type="checkbox"/><input type="checkbox"/>, Place of Publication:</p> <p>Ministry of Science and Technology, R.O.C., Grant Proposal(s) (closed):</p>
<p>Course(s) Taught</p>	
<p>Year(s) of Teaching Experience</p>	<p><input type="checkbox"/>None <input type="checkbox"/>One Year <input type="checkbox"/>Two Years <input type="checkbox"/>Three Years or more</p>
<p>Teaching/ Course evaluation surveys provided</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Application Materials Need to be Returned</p>	<p><input type="checkbox"/> No <input type="checkbox"/> Yes : I agree to receive returned application materials via “Paid-by-Addressee Delivery Service”, please mail to Mailing Address _____ Addressee _____ Phone _____</p>

