外交部中部辦事處產學合作實習計畫報名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 | |  | | 性別 | | | □男 □女 | | | 身分證字號 | | |  | | |
| 生日 | | 年 月 日 | | 就讀大學系所 | | |  | | | 年級 | | |  | | |
| 聯絡地址 | | |  | | | | | | | | | | | | |
| 聯絡電話 | | |  | | | 手機 | | |  | | | 語文  能力 | |  | |
| 緊急聯絡人姓名 | | |  | | | 緊急聯絡人手機 | | |  | | |
| 實習(工作)經歷 | | |  | | | | | | | | | | | | |
| 興趣專長 | | |  | | | | | | | | | | | | |
| 可實習時段:（請勾選） | | | | | | | | | | | | | | | |
|  | 週一 | | | | 週二 | | | 週三 | | | 週四 | | | | 週五 |
| 上午 |  | | | |  | | |  | | |  | | | |  |
| 下午 |  | | | |  | | |  | | |  | | | |  |
| 晚上 |  | | | |  | | |  | | |  | | | |  |