數位學習與教育研究所

碩士論文計畫口試申請表

Graduate Institute of Digital Learning and Education

Master Thesis Oral Proposal Hearing Application Form

申請日期Date of application： 年Yr 月M 日D

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| 姓 名  Student Name | |  | | | 學號Student ID | |  | | |
| 論文題目  Thesis Title | |  | | | | | | | |
| 口試時間Time | | 年Yr 月M 日D  時 分xx:xx | | | | 地點Venue | | |  |
| 委 員 姓 名Name of Committee members | 服 務 單 位Affiliation | | | 職 稱  Title | | 論文初稿寄送地址  Mailing Address  (for sending the draft thesis) | | | |
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| 指導教授簽名  Advisor Signature | | |  | | | 所長簽名Chairperson  Signature | |  | |
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說明Explanation：

1. 申請日期和口試日期間隔至少二週以上，以利行政作業。

For administrative purpose, please apply at least 2 weeks before the oral examination.

1. 校外委員如須入校停車，請先詢問車號，並下載校外委員入校申請表。

If an external committee member needs parking, please inquire his/her vehicle number, fill out the Parking Application Form, and summit it to the Institute Office.