材料系□碩士□博士畢業口試委員資格審查申請表

Application for Committee Member’s Qualification

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| --- | --- | --- | --- | --- | --- |
| 指導教授簽名：  Advisor’s Signature |  | | 申請日期  Date | |  |
| 學生姓名  Name | 學號  Student ID | 年級Grade | 聯絡電話  Phone No. | | 口試日期  Oral Test Date |
|  |  |  |  | |  |
| 論文題目  Dissertation |  | | | | |
| 請惠予審查下列口試委員之資格： | | | | | |
| 姓名Committee member’s name： | 學歷Education： | | | 現職Position： | |
|  |  | | |  | |
| 檢附資料Attachment：  □學經歷資料Academic experience  □論文著作一覽表List of papers | | | | | |
| 審核結果 | □同意 □不同意 | | | | |
| 學術小組召集人：  會議日期： | | | | | |

\*Master Degree: committee member who is not assistant professor nor in the approved list.

\*Doctoral Degree: committee member who is not associate professor nor in the approved list.