

I-SHOU UNIVERSITY

Application Form for Resumption of Schooling

Application Date: (Y/M/D) □□□□ — □ — □□□□

Student No.		Name		Birthday	(Y/M/D)
College, Dept. and Grade	College	<input type="checkbox"/> Year ____ of Doctoral Degree Program <input type="checkbox"/> Year ____ of Master's Degree Program <input type="checkbox"/> Grade ____ of Bachelor's Degree Program Class ____			
	Dept. & Grade				
Term of Suspension of Schooling	From the ____ semester of the academic year ____ to the ____ semester of the academic year ____				
Reasons for Resumption of Schooling					
Applicant's Signature/Seal			Supporting Documents	<input type="checkbox"/> Military Discharge Order <input type="checkbox"/> Medical Diagnosis Certificate	
Note	Those who need to apply for military draft deferral please visit the Student Campus Life Guidance Section.				
Approval	Staff-in-charge	Student Campus Life Guidance Section (for Males only)	Counseling and Guidance Section	Section Chief of Registration Section	
	Deputy Dean of Academic Affairs	Ratification			

※ Please sign and fill in with the date.

Retention Period: 5 years