**學年度 學期整合義联集團資源開設課程申請表**

Application for Courses Integrated with E-United Group Resources in the \_\_\_\_Semester of Academic Year \_\_\_\_\_\_\_

申請日期Application Date： 年/Y 月/M 日/D

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| --- | --- | --- | --- | --- | --- | --- | --- |
| 開課系級  Dept. |  | 課程代碼  Course Code |  | | 科目名稱  Course Title |  | |
|
| 學分/時數  Credits/  Hours | / | 必/選修  Required/  Selective |  | | 上課時間  Class Time | 星期  Mon.~Sun. | 節  Class Period |
| **□多位教師合開課程**（檢附「授課計畫表」）  Multiple Instructor Course (Please attach “Course Outline.”)  集團業界專家教師人數： 位，鐘點分配： （授課教師須依規定以兼任教師程序聘請）  授課時間： 年 月 日~ 年 月 日(星期：　　時間：　~　　)  Number of instructors from the enterprises: \_\_\_\_\_\_; teaching hours allotment :\_\_\_\_(The instructors are to be hired based on the adjunct instructor employment procedure.)  Class time: \_\_\_\_\_/\_\_\_\_/\_\_\_\_\_ (Y/M/D)~ \_\_\_\_\_/\_\_\_\_/\_\_\_\_\_ (Y/M/D) (Day: Time: \_\_\_\_~\_\_\_\_)  **□開設模組教學課程**（檢附「授課計畫表」及「模組教學課程教師授課一覽表」）  集團業界專家協助教學週次： （授課教師不須發聘，鐘點費以領據方式請領）  Course of Teaching Module Design (Please attach “Course Outline” and “Teacher List of Courses of Teaching Module Design.”)  Number of teaching weeks by enterprise professionals: \_\_\_\_\_ (the instructors can be hired without employment procedure; the hourly payment is collected by receipts.)  教師應具備專長Professional specialties required for the instructions are： | | | | | | | |
| **□校外實習**(檢附實習計畫書)  Off-campus internship (Please attach “Internship Plan.”)  **□校外教學參訪** Off-campus teaching and visits  (1)機關名稱/Institute： 單位名稱/Section： 學生人數/Number of students：  校外教學參訪(實習)日期： 年 月 日~ 年 月 日(星期：　　時間：　~　　)  Duration: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (Y/M/D)~ : \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (Y/M/D)  Time: \_\_\_\_\_:\_\_\_\_ ~ \_\_\_\_\_:\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_ (Mon.~Sun.)  參訪(實習)目的Objectives of the teaching and visits ( internship)：  (1)機關名稱/Institute： 單位名稱/Section： 學生人數/Number of students：  校外教學參訪(實習)日期： 年 月 日~ 年 月 日(星期：　　時間：　~　　)  Duration: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (Y/M/D)~ : \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (Y/M/D)  Time: \_\_\_\_\_:\_\_\_\_ ~ \_\_\_\_\_:\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_ (Mon.~Sun.)  參訪(實習)目的Objectives of the teaching and visits ( internship)： | | | | | | | |
| **系主任**  **Chairman of the Department** | | | | **院長(中心主任)**  **Dean of the College (Director of the Center)** | | | |
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備註：本申請表連同相關檢附資料送至課務組彙整後，轉交創新育成暨產學合作中心續辦。

Remark: this application form and the attached documents are to be collected in the Curriculum Section and transferred to Innovation Incubation Center for further processing.