KMU Scholarship Application Form

**Kaohsiung Medical University**

Academic Year: 106

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| □***Potential KMU student****This scholarship application form must be submitted along with all application documents for admission to the Office of Academic Affairs.*□***Current KMU student****This scholarship application form must be submitted along with transcript of previous academic year to the Office of Global Affairs.* |

General Information

Name:

Gender: □Male □Female

Nationality:

Phone number: ( )

E-mail:

Correspondence address:

Which department/ graduate institute and degree do you wish to apply?

* Department/ graduate institute:
* Degree: □ Undergraduate Program □ Master's Program □ Ph.D. Program

Are you currently receiving or applying for any other scholarship?

□ Yes (Name of scholarship): 

□ No

Which KMU scholarship would you like to apply?

Undergraduate students can only apply for Scholarship Type C. Master students can apply for Scholarship Type B and C. Ph.D. students can apply for Scholarship Type A, B and C. On the limits of controlled budgets, the result of scholarships awarded depends upon the reviewed by Committee of Internatonal Academic Communication.

* Type A: 1-year tuition waived, TWD10,000 stipend per month, and free student dorm room.
* Type B: 1-year tuition waived and free student dorm room.
* Type C: 1-year tuition waived.



Will you still pursue your degree at KMU if you are not granted KMU scholarship?

* Yes　　　　□ No

Education Background

|  |  |  |  |
| --- | --- | --- | --- |
|  Name of Institution |  Duration of Study |  Degree | Major |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Extracurricular Activities

|  |  |  |
| --- | --- | --- |
| Period | Description of Activity |  Name of Institution |
|  |  |  |
|  |  |  |
|  |  |  |

Autobiography

Word count: within 300 words

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| kmu-logo-m |

References

Referee 1

Name: Relation to applicant:

Title of duties:

Phone number: ( )

Referee 2

Name: Relation to applicant:

Title of duties:

Phone number: ( )

Declaration

I authorize this University to verify all of the information provided above. After being admitted into KMU, if any of the information provided are found and proved to be false, I have no objections in accepting the consequence of having my grant status revoked.

Applicant’s Signature: 　 Date: / /

 　　　　　　　　　　　　　　　　　　　　　　　　(month) (day) (year)

Office of Global Affairs

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