

**淡江大學學生具雙重學籍身分申請表**  
(Tamkang University Dual Enrollment Status Application Form)

<b>申請人姓名</b> (Chinese Name)	
<b>就讀本校系、所、學位學程別及入學年月</b> (Enrolled at Department, Graduate Institute, or Degree Program at TKU and Date of Admission) <b>第 1 個身分</b> (First Enrollment Status)	<input type="checkbox"/> 博士班(Doctoral Program) <input type="checkbox"/> 碩士班(Master's Program) <input type="checkbox"/> 碩專班(Executive Master's Program) <input type="checkbox"/> 日間學制學士班(Undergraduate) <input type="checkbox"/> 進學班(The Bachelor Program of Extension Education) _____系/所(Department) _____組(Division)
<b>就讀他校或本校系、所、學位學程別及入學年月</b> (Enrolled at Department, Graduate Institute, or Degree Program at Another University or TKU and Date of Admission) <b>第 2 個身分</b> (Second Enrollment Status)	<input type="checkbox"/> 博士班(Doctoral Program) <input type="checkbox"/> 碩士班(Master's Program) <input type="checkbox"/> 碩專班(Executive Master's Program) <input type="checkbox"/> 日間學制學士班(Undergraduate) <input type="checkbox"/> 進學班(The Bachelor Program of Extension Education) _____系/所(Department) _____組(Division)
<b>通訊住址</b> (Address)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>電話</b> (Contact Phone No.)	( ) _____ 手機(Mobile) : _____
<b>申請人</b> (Applicant)	(請親自簽章 Sign Personally)    年(Year)    月(Month)    日(Day)
<b>系、所、學位學程主管簽章(請加註意見)</b> (Signature of the Department, Graduate Institute, or Degree Program Supervisor)	
_____年(Year)    月(Month)    日(Day)	
<b>教務處註冊課務發展中心</b> (Office of Academic Affairs, Registration and Curriculum Development Center)	
_____年(Year)    月(Month)    日(Day)	

備註：依「淡江大學學生申請雙重學籍規則」辦理。(Note: Processed in accordance with the "Tamkang University Regulations for Students Applying for Dual Enrollment Status".)

\*依本校個人資料管理規範，本表單各項個人資料僅作為業務處理使用，並於保存期限屆滿後，逕行銷毀。(In accordance with the university's personal data management regulations, all personal information provided on this form will be used solely for business processing purposes and will be destroyed upon the expiration of the retention period.)