國立中正大學學生學籍變更申請書

**National Chung Cheng University**

**Application Form for Student Information Change/Correction**

申請日期Application date:： 年 月 日

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 系所別  Department | | 學 號  Student ID No. | | | 變更後姓名  Name after change | | 入學年月  Date of Entry | | □畢業生/離校生  Graduated/ withdrawal  □在校生Current student | |
|  | |  | | |  | |  | |
| **變 更 事 項**  **Items to be changed** | | | **變 更 前**  **Information before change** | | | **變 更 後**  **Information after change** | **檢附證明文件**  **Related supporting documents** | | | **是否為首次變更**  **First time to Change?(yes/no)** |
| □中文姓名變更  Chinese name | | |  | | |  | 戶籍謄本  Household Registration Transcript | | |  |
| □身分證字號變更  Personal ID number | | |  | | |  |  |
| □英文姓名變更  English name | | |  | | |  | 護照  passport | | |  |
| □出生年月日變更  Date of Birth (Year/Month/Day) | | |  | | |  | 身分證或戶籍謄本或護照  Personal ID Card or Household Registration Transcript or passport | | | |
| 現在住所Mailing Address |  | | | | | | | 申請人簽名Applicant’s Signature | | |
| 電 話  Phone number |  | | | | | | |
| 承辦人Administrator | | | | 教學組組長Registrar | | | | 教務長Dean of Academic Affairs | | |
|  | | | |  | | | |  | | |
| 敬會：  系辦公室Office of Department Enrolled： （蓋圓戳章） | | | | | | | | | | |
| 敬會：  學安組 （女生和畢業生免會）  Division of Student Safety (females and graduates are exempt) | | | | | | | | | | |

**畢業生更改姓名者，需帶畢業證書正本至教學組辦理。**

**Notice for graduates change the student's name and date of birth:**

**The name on the diploma must be changed to match**. Please turn in your original diploma. 3 working days are required to change the diploma.

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