								Date(YY/MM/DE	, , , , , , , , , , , , , , , , , , , ,		年 月 日	
銘傳大學	學	教師	校外教	學及行文	申彰	青表 Ap	plication For	m for Off-Camp	us Teaching (V	Vritten R	eport Required)	
Ming Chuan l	Unive	rsity				Tea	acher's signa	ture 教師:				
班級名稱 Class Name		科目名稱 Course Name		教師姓名	原上課時間		III		校外教學時間			
				Teacher's Name		Original Class Time			Off-Campus Teaching Time			
					-	日期	Date	教室 Classroom	日期 D	ate	地點 Place	
班級代號 Class Number		科目代號 Course Number		教師編號 Teacher's ID No.		節 次 Period			節 次 Period			
申請目的及	理由	Reason									批示 Comments	
教學單位 Department					學務處 Student Affairs Division							
學務組 Student Affairs Section	· · · · · · ·				桃園 行政處							
教務組 Academic Affairs Section						oyuan nistration						
課務組 Curriculum Section					Acade	務處 mic Affairs vision						

備註 1:本表供需行文者填寫及使用。請於七天前由教師本人簽章提出申請,逾期申請不予受理。Note: This form is Off-Campus Teaching for which a written report is necessary. Applicants should sign and submit the application 7 days before the scheduled activity. Overdue applications will not be accepted. *Comments or reviews should be made by related sections. 備註 2:本表單蒐集之個人資料,僅限於教務管理及校務分析使用,非經當事人同意,不轉做其他用途,亦不會公佈任何資訊,並遵循本校資料保存與安全控管辦理。 Note: The personal information collected on this form is used only for academic affairs data management and university affairs analysis. Without student's express agreement, this information will not be used for any other purpose, nor will it be publicized, in accordance with the university's data storage and security control management procedures.