Handling officer: Contact number:

National Taiwan Normal University Employment Application Form for Adjunct Technical Specialist	Recruiting department:	_____/___/___ (YYYY/MM/DD)

Name (National ID number or passport number)	Gender	Date of birth	Nationality		Contact	
Chinese English		_____/___/___ (YYYY/MM/DD)		□Republic of China □Dual nationality (Republic of China and ____ nationality) □Foreigner (____nationality)		Address: Tel: Mobile: e-mail：

Employment level	Technical Specialist (_____ Rank, Adjunct)	□Part-time □Part-time (Continuing education program)	**Reason for new recruitment**		Number of employment recruits _____/___/___ (YYYY/MM/DD) □___ Number of adjunct faculty member reviewed, passed, and issued in the review of the ___ meeting □Project signed, approved, and issued	**Eligibility to participate in labor insurance and to receive labor pension**	1.**Currently has a full-time position** □Participates in labor insurance □Participates in the insurance for public servants or military personnel 2.**Currently does not have a no full-time position** □Retired military, public servant, and teaching personnel Retirement institution: _____ Age of retirement: _____ □Non-retired military, public servant, and teaching personnel
Rank Evaluated by Qualification Evaluation Meeting	Technical Specialist (_____ Rank, Adjunct)						

1. Education	**Name of school of highest education (Please fill in Chinese)**	**College/Institute/ Department (Please fill in Chinese)**	**Study duration (month/year)**	**Graduated or degree conferred in (month/year)**	**Degree title (Please fill in Chinese)**	**Certificates submitted**	
						Title	**Number of items**
	Domestic		From ___/___ to ___/___	____/____ (YYYY/MM)			
	Foreign		From ___/___ to ___/___	____/____ (YYYY/MM)			

2. Main work experience	**Name of service agency or school served**	**Position**	**Full-time or part-time**	**Employment duration (month/year)**	**Total years of service**	**Name of courses taught or job role**	**Certificates submitted**	
							Title	**Number of items**
				From ___/___ to ___/___	____/____ (YYYY/MM)			
				From ___/___ to ___/___	____/____ (YYYY/MM)			
				From ___/___ to ___/___	____/____ (YYYY/MM)			
3. Current position				From ___/___ to ___/___	____/____ (YYYY/MM)			

4. Specific facts, special achievements or accomplishments, international awards of the proposed candidate: please attach a separate sheet for description using any format and complete documentation: Please attach a separate sheet for description in any format and complete documentary proof.

Previously reviewed qualifications	**Level**	**Certificate no.**	**Starting date of years of service**	**School managing the review process**	**Courses planned to offer after employment**	**Course name**	**Department /Faculty /Institute and year**	**Weekly teaching hours**	**Compulsory or elective**	**Semester**	**Duration of employment**
		Certificate number _____									___/___/___ (YYYY/MM/DD) to ___/___/___ (YYYY/MM/DD)
		Certificate number _____									

Whether the candidate should	□Yes □No, reason:	Department-Level Supervisor:	College-Level Supervisor:

- - - -

Handling officer: Contact number:

<table>
<tr><td>receive hourly remuneration</td><td colspan="2"></td><td colspan="2">(Signature and seal)</td><td colspan="2">(Signature and seal)</td></tr>
<tr><td rowspan="4">Review by Faculty Evaluation Committee</td><td rowspan="2">Department-Level Faculty Evaluation Committee</td><td>____/____/____
(YYYY/MM/DD) __ semester of __ academic year
Reviewed and approved at the ___ Department-Level Faculty Evaluation Committee</td><td rowspan="4">Handling department</td><td rowspan="2">Office of Academic Affairs</td><td colspan="4">Course review:</td></tr>
<tr><td>Voting results: _____ attendees in total, ____ in favor
Department-Level Supervisor:

(Signature and seal)</td></tr>
<tr><td rowspan="2">College-Level Faculty Evaluation Committee</td><td>____/____/____
(YYYY/MM/DD) __ semester of __ academic year
Reviewed and approved at the ___ College-Level Faculty Evaluation Committee</td><td rowspan="2">Office of Human Resources</td><td colspan="4">I. Number of personnel review: Current number of personnel</td></tr>
<tr><td>External Review:
☐Passed ☐Failed
Voting results: _____ attendees in total, ____ in favor
Dean:

(Signature and seal)</td><td>Full-time</td><td></td><td>Part-time</td><td></td><td colspan="4">II. Qualification review:</td></tr>
<tr><td colspan="2">Executive Vice President</td><td></td><td colspan="2">President</td><td colspan="4"></td></tr>
</table>

Description:

I. All departments/institutes shall employ adjunct teachers after full-time faculty members' teaching hours and courses are scheduled in accordance with regulations.

II. Please indicate the whole academic year, first semester, or second semester for the duration of employment.

III. Adjunct faculty members at NTNU shall not be older than 70 years old starting from the 2009 academic year. Adjunct faculty members are not allowed to teach compulsory courses.

IV. Review procedure: Department (Graduate Institute) collates the Employment Application Form for Adjunct Technical Specialist ⇨ Office of Human Resources (Qualification Review) ⇨ Department (Graduate Institute) Faculty Evaluation Committee ⇨ Office of Academic Affairs (course review) ⇨ Personnel Office (number of personnel and qualification review) ⇨College-level Evaluation Committee (including External Review) ⇨ Submission for Approval ⇨ Office of Human Resources (issuance of employment contract)

V. When a department appoints a technical specialist, the following shall be attached: (1) Guidelines for Appointing Technical Specialists (2) Regulations for Colleges' Appointment of Professional Technicians to Teaching Positions (3) Proofs of working in a field related to courses they intend to teach, special capabilities, achievements or major international awards.

VI. The appointment form shall be filled out in detail, and aforementioned documentary proof shall be submitted to the Office of Human Resources for qualification evaluation purposes.

VII. Calculation of the years of service of all levels of technical specialists and their years of professional service shall be based on full-time work. For part-time work, year of service shall be halved. If departments imposed stricter regulations on appointments, they shall prevail.

The English version is provided for reference only.
The Chinese version shall prevail in case of any discrepancies between the English and Chinese versions.