

## Application Form

Position Applied for : Professor Associate Professor Assistant Professor

Full Name	Chinese Name		Gender		Photo (Taken in last 3 years)
	English Name		Identity Card No.		
Current Post			Date of Birth	/ / (YYYY/MM/DD)	
			E-mail		
			Contact Number	(O) : (H) : (M) :	
Permanent Home Address					
Current Home Address	<input type="checkbox"/> same as above				
Emergency Contact		Contact Number			

Education	School		Thesis Topic	Advisor	Period
	Ph.D.				
	Master's				
	Bachelor's		X	X	

Significant Work Experience	Institution	Position	Period
Academic Experience			
Area of Specialization			
Courses able to offer			

### Academic Publications

	Article Title	Periodical Title (specified if published on SSCI and TSSCI journals)	Publication Year	Author	
Journal Articles	1.			<input type="checkbox"/> Single Author <input type="checkbox"/> First Author <input type="checkbox"/> Corresponding Author <input type="checkbox"/> Author	Author(s):

	2.			<input type="checkbox"/> Single Author <input type="checkbox"/> First Author <input type="checkbox"/> Corresponding Author <input type="checkbox"/> Author	Author(s):
	3.			<input type="checkbox"/> Single Author <input type="checkbox"/> First Author <input type="checkbox"/> Corresponding Author <input type="checkbox"/> Author	Author(s):
	Title of Monograph/Monograph Essay	Publisher	Publication Year	Author	
Monographs or Monograph Essays	1.			<input type="checkbox"/> Single Author <input type="checkbox"/> First Author <input type="checkbox"/> Corresponding Author <input type="checkbox"/> Author	Author(s):
	2.			<input type="checkbox"/> Single Author <input type="checkbox"/> First Author <input type="checkbox"/> Corresponding Author <input type="checkbox"/> Author	Author(s):

	3.			<input type="checkbox"/> Single Author <input type="checkbox"/> First Author <input type="checkbox"/> Corresponding Author <input type="checkbox"/> Author	Author(s):
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Research projects in which you are the PI or Co-PI

Project Title (Project Number)	Period	Funding Agency	Position	Publications after Project Completed
1.			<input type="checkbox"/> Principal Investigator <input type="checkbox"/> Co-PI	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Journal Article <input type="checkbox"/> Monograph
2.			<input type="checkbox"/> Principal Investigator <input type="checkbox"/> Co-PI	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Journal Article <input type="checkbox"/> Monograph
3.			<input type="checkbox"/> Principal Investigator <input type="checkbox"/> Co-PI	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Journal Article <input type="checkbox"/> Monograph
Award Records				
Other Supporting Documents				

Autobiography

Additional  
Comments

Signature :

Date :     /     /     (yyyy/mm/dd)