齐鲁工业大学聘用

外国文教专家计划申报书

申请单位：

联 系 人：

填表日期： 年 月 日

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **第一部分：外国专家基本情况 Part I: To be filled by the candidate** | | | | | | | | | | | | | | | | |
| Name on Passport  护照姓名 |  | | Name in Chinese  中文译名 | | | | | |  | | | Gender  性别 | | | |  |
| Date of birth  出生日期 | 月 日 年  mm/dd/yyyy | | | | | Nationality  国 籍 | | | | | | |  | | | |
| Marital Status  婚姻状况 |  | | | | | Highest Degree  and Date of Issue  最后学位及获得时间 | | | | | | |  | | | |
| Place of Birth  出生地 |  | | | | | | | | | | | | | | | |
| Passport No.  护照号 |  | Expiration Date  护照有效期 | | | | 月 日 年  mm/dd/yyyy | | | | Place of Issue  签发地 | | | | |  | |
| 健康状况 |  | | | | | 来校期限 | | | | | | | □短期： 天  □长期： 天 | | | |
| Permanent address at home country  所在国家的永久地址 | Apartment number房间号 Street 街道 City 城市 State or province省 Country国家 Postal code邮编 | | | | | | | | | | | | | | | |
| Religion (if applicable)宗教 Organization associated with 派遣机构 Hobby爱好 Talent特长  Mother tongue母语 Chinese Level汉语水平  Frequently used prescription drugs 常用药物 | | | | | | | | | | | | | | | | |
| Emergency Contact  紧急联系人 | Name姓名 Relationship关系  Address 住址  Phone电话 E-mail电邮 | | | | | | | | | | | | | | | |
| Educational background from university or college (most recent first and dates must be included)  教育经历  (从大学填起) | Institution  学校 | | | Duration  周期 | | | Degree&Certificate学位 | | | | | | Area of Study  专业 | | | |
|  | | |  | | |  | | | | | |  | | | |
| Employment Experience (most recent first and dates must be included)  工作经历 | Employer  工作单位 | | | Duration  周期 | | | Position  职位 | | | | | | Place  地点 | | | |
|  | | |  | | |  | | | | | |  | | | |
| Training Experience (most recent first and dates must be included)  培训经历 | Program  名称 | | | Duration  周期 | | | Institution  机构 | | | | | | Certification  证书 | | | |
|  | | |  | | |  | | | | | |  | | | |
| Volunteer Experience  (most recent first and dates must be included)  志愿者经历 | Activity  名称 | | | | Duration  周期 | | | | | | Place  地点 | | | | | |
|  | | | |  | | | | | |  | | | | | |
|  |  | | | 1 | | | | 2 | | | | | | 3 | | |
| Accompanying family member(s)  随行家属 | NAME  姓名 | | |  | | | |  | | | | | |  | | |
| Relationship to the applicant  与申请人关系 | | |  | | | |  | | | | | |  | | |
| Nationality国籍 | | |  | | | |  | | | | | |  | | |
| Passport number护照号码 | | |  | | | |  | | | | | |  | | |
| \*The applicant should ensure that information supplied in this Application is correct and complete, and recognize it is his/her responsibility to provide all necessary documentary evidence of his/her qualifications, education background and employment experience and hereby authorize QLU to obtain further information where necessary. QLU reserves the right to withdraw any offer to him/her or cease his/her placement at any stage during the application where false or misleading information has been provide  \*申请人须保证所填申请信息是正确和完全并有责任提供证明其资历、教育背景和任职经历的所需文件并授权齐鲁工业大学在需要时获取更多材料。若在申请过程中发现提供虚假和错误信息，齐鲁工业大学有权取消对其的聘请或停止受理。  申请人签字： | | | | | | | | | | | | | | | | |

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| **第二部分：申请单位填写 Part II: The following part is not for applicant** | | | | | | | | | | | | | | |
| 外国文教专家类型 | | □语言专家 □专业专家 □合作项目专家 | | | | | | | | | | | | |
| 历次来华情况 | |  | | | | | | | | | | | | |
| 邀请单位 | |  | | | | | | | | 邀请人 | | |  | |
| 指标 | 项目 | 内涵 | | | | | | | | | | | | |
| 聘请  目标 | 授课与培养人才 | □ 指导研究生  □ 授课，授课名称 ，授课学时  □ 学术专题讨论  □ 其他 | | | | | | | | | | | | |
| 学科建设 | □ 改造老学科、老专业  □ 建设新生学科、新专业  □ 开设新课程  □ 编写新教材、资料  □ 新建、改造实验室  □ 其他 | | | | | | | | | | | | |
| 学术交流与合作科研 | □ 合作研究  □ 合作撰写论文  □ 解决技术关键  □ 引进新技术  □ 其他 | | | | | | | | | | | | |
| 商谈合作协议 | □ 建立人员交流关系  □ 建立合作项目，研究课题  □ 提供资助  □ 其他 | | | | | | | | | | | | |
| 聘请  理由 | A. 对方专业领域，专长？  B. 接待对方对我相应专业的教学与科研有何推动？ | | | | | | | | |  | | | | |
| 对方对我的基本态度 | A. 友好  B. 比较友好  C. 一般 | | | | | | | | | | | | | |
| 接待  计划 | A.访问路线及日程安排 | | | | | |  | | | | | | | |
| B. 外地接待单位 | | | | | |  | | | | | | | |
| C. 主要活动 | | | | | |  | | | | | | | |
| 费用预算 | 国际旅费 | |  | | 专家工薪 | | | |  | | 讲课费 | | |  |
| 专家补贴 | |  | | 住宿费 | | | |  | | 城市间交通费 | | |  |
| 住宿 | （可填写校区、面积要求） | | | | | | | | | | | | |
| 经费来源 | 申请单位负担 | | | | |  | | | | 学校负担 | | |  | |
| 专家自负 | | | | |  | | | | 其他来源 | | |  | |
| 申请单位联系人 | | | |  | | | | 电话 | | | |  | | |
| 申请单位意见 | | 该申请人所填内容属实，应聘职位为□助教 □讲师 □副教授 □教授，每周课堂授课时间为□14小时 □16小时 □其他（ 小时），并通过 □电话约谈 □面试 □审核材料 □其他方式考核，符合国家规定资质条件，同意聘请该申请人来院系工作。（请在所选项□内打√）  负责人签字：  日期： 年 月 日 | | | | | | | | | | | | |
| 国际合作处意见 | | 经办人签字：  负责人签字：  日期： 年 月 日 | | | | | | | | | | | | |
| 备注 | |  | | | | | | | | | | | | |

**注：**

1. **申请人详细简历、护照信息页复印件、学位证书复印件、培训证书复印件、推荐信等请附后。**
2. **该表A4纸打印，一式二份。**

**3. 申请将完整材料统一报送国际合作处。**