

中國醫藥大學證件補繳切結書

China Medical University Affidavit for the Submission of Missing Identification Documents

系名(Department)：

_____ 系(Department) _____ 組(Class)

姓名(Name of the Applicant)：_____ 學號(Student Number)：_____

辦理_____學年度新生註冊

(Application for new student registration in the _____ academic year)

其他(Other)

請說明(Please Explain)：_____

因欠缺下列應繳驗證件，今願依相關規定於一週內攜證補辦繳驗程序，否則願意放棄入學資格絕無異議。(I hereby agree to submit the following missing document(s) within one (1) week in order to complete the document verification process; otherwise I shall voluntarily forfeit my admission eligibility.)

切結補驗證件名稱(Document(s) to be submitted for verification)：

國民身分證(National Identification Card)

畢(結)業證書或證明書正本(Original copy of diploma or certificate of graduation)

轉學(修業)證明書(Certificate of transfer or program completion)

退伍令(或退伍證明書)或除役令(Military Discharge Order (or Certificate))

國民兵證書或免役證件(National Military Identification Certificate or Certificate of Draft Exemption)

未領公費證明或解除服務年限證明(Proof of not receiving public funds or proof of exception from service requirements)

相片(Photo)_____ 張

其他(Other)_____

上列補繳證件共計(Total number of submitted documents) _____ 項

切結人簽章(Signature of Affiant)：_____

切結日期(Date)：_____年(Year) _____ 月(Month) _____ 日(Day)