

河南中医药大学奖学金项目申请表

Application Form for Scholarship of HUCM

申请人基本情况/Personal Information			
姓/Surname:		中文名字/Chinese Name	照片/Photo
名/Given Name:			
性别/Gender	国籍/Nationality	护照号码/Passport No.	
宗教/Religion	婚否/Marital Status	出生地点/Place of Birth	
出生日期 (日/月/年) Date of Birth: / /		目前居住地/Place of residency at present:	
母语/Native Language	手机/Cell Phone	邮箱/E-mail	
职业/Occupation	最后学历/Education Level	工作或学习单位/Employer or affiliated institution	
永久通信地址/Permanent address for correspondence including postcode, contact person and telephone number			
教育经历 (从高中起) /Academic Background (From High School)			
在校期间 (From/To)	学校 (Institutions)	所获学历 (Diploma/Degree Obtained)	
奖学金类别/Type of scholarship			
奖学金类别 Type of scholarship	Chinese Government Scholarship-Bilateral Program () Chinese Government Scholarship-Chinese University Program () Henan Provincial Government Scholarship ()		
学习类别 Study program	学士/ Bachelor's program () 硕士/ Master's program () 博士/ Doctoral program () 汉语进修生/ Chinese language program () 普通进修生/ General Scholar Program () 高级进修生/ Advanced Scholar Program () 其它/other ()		
请字迹工整，以免出错./All information filled in should be written legibly to avoid misunderstandings or mistakes.			
日期/Date: _____ 申请人签字/Applicant's signature: _____			