

104學年度第二學期 服務學習課程保險申請表

系所：

課程名稱：

活動日期：

保險名單：共 位

編號	學號	姓名	出生年月日	身分證字號
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

注意事項：

- 1.本申請表請於實施二週前提出申請，請務必確保資料正確性及完整性。
- 2.外籍生請在「姓名」欄位填寫中文名字及護照英文名字；「身分證字號」欄位請填寫護照號碼，陸生請填護照號碼及許可證號。

104 學年度第二學期 服務學習課程保險申請表

編號	學號	姓名	出生年月日	身分證字號
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				
26.				
27.				
28.				
29.				
30.				
31.				
32.				

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I-Shou University
Second Semester of Academic Year 2015
Group Insurance Application Form for Service-Learning Course

Department (Institute / Program):

Course Title:

Service Date:

A total of ____ students

No.	Student No.	Name	Date of Birth	National ID No.
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				

Notes:

1. Please complete and submit this application form at least two weeks prior to the scheduled service, and ensure that the information provided herein is true and correct.
2. For **international students**, please fill in the column "Name" with both the name in Chinese and the name appearing on the passport, and fill in the column "National ID No." with the passport number. For **mainland Chinese students**, please fill in the column "National ID No." with the passport number and the Exit & Entry Permit No.

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Second Semester of Academic Year 2015
Group Insurance Application Form for Service-Learning Course

No.	Student No.	Name	Date of Birth	National ID No.
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				

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ISU-PI-D-031-212

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Second Semester of Academic Year 2015
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ISU-PI-D-031-212

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