為安排碩、博士學位考試(畢業口試),請老師選擇口試時間,並提出口試委員建議 名單。(說明:碩士學位考試委員為三至四人,其中至少一位委員應為本學程教師且與指 導老師不同領域。碩士學位考試委員由指導教授提出,並經學程主任同意聘請之。博士學 位考試委員為七人,包括校外委員三人與校內委員四人(含學程教師及學程委員),於舉行 考試前由指導教授提出建議名單,經本學程主任同意後聘請之。)

請填妥本問卷,最遲於口試前3周繳交學程辦公室,謝謝。

In order to schedule the Degree Examination, professors are asked to choose a time and provide a recommended list of Examination Committee members. (The Examination Committee for the master's degree examination shall consist of 3-4 reviewers; at least one of the reviewers shall be an IPCS faculty member with a different academic specialty than the advisor. The list of committee members for the master's degree examination shall be provided by the advisor and approved by the Program Director. The Doctoral Examination Committee shall consist of 7 reviewers; at least 3 of the reviewers shall be from outside of NTU and 4 reviewers from within NTU (including IPCS faculty and members). The list of suggested Doctoral Examination Committee members shall be proposed by the advisor, and members will be appointed with the approval of the Program Director.)

Please fill out this questionnaire and submit it to the IPCS Office before 3 weeks prior to the examination date. 註:已申請學位考試之研究生,若預估無法於該學期內完 成學位考試,需於1月30日/6月30日之前到學程辦公 室填寫"撤銷申請書"。逾期未撤銷亦未舉行考試者, 學生 Student: 以一次不及格論。如有任何疑問,請洽學程辦公室。 口試題目 Thesis Title: Note: For graduate students who have applied for the degree examination, if they will not be able to complete 預計口試時間 Intended Time of Examination: it within the semester, they must go to fill the 月 日 點 "Cancellation Application" before January 30th/June 口試委員建議名單: 30th. Those who fail to revoke or hold the examination within the time limit shall be regarded as failure. If you 1. 姓名 Name: have any questions, please contact the Program Office. (單位職稱 Position title:) 口試地點 Exam Location:_ (請安排在全變中心 G202 室及後棟 403 講堂 2. 姓名 Name: ,若特殊狀況請經學程主任同意。Please arrange for vour examination to be held in the Global Change and (單位職稱 Position title:) Research Center Rm. G202 and Lecture Hall 403 in the back building. If there are special circumstances, please 3. 姓名 Name: obtain the approval of the Program Director. _(單位職稱 Position title: 4.姓名 Name: (單位職稱 Position title:) 指導教授簽名 5. 姓名 Name: Advisor signature: (單位職稱 Position title:) 共同指導教授簽名 Co-advisor Signature: 6. 姓名 Name: (單位職稱 Position title: 學程主任簽名 Program Director: 7. 姓名 Name:

(單位職稱 Position title:

口試委員聯絡資料表(請款用) Examination Committee Contact List

口委名册:

A.有在臺大帳務系統報支過請提供身分證字號,例如:校內教授、校外教授曾擔任過臺大口委 B.校外教授未在臺大帳務系統報支過,請提供身分證影本、地址及帳戶(郵局/玉山/華南)影本

List of Committee Members:

- A. For those who have previously used the NTU payment system, please provide your ID number (e.g. if you have given a lecture or been an exam committee member in the past)
- B. For those who have never used the NTU payment system before, please provide a copy of your ID, home address, and a copy of your bankbook.

1.姓名 Name:	身分證 ID number:
單位職稱 Position title:	地址 Address:
	身分證 ID number:
	地址 Address:
3. 姓名: 單位職稱 Position title:	步分置: 地址 Address:
4. 姓名:	身分證:
單位職稱 Position title:	地址 Address:
5. 姓名:	
	地址 Address:
6. <u>姓名:</u> 單位職稱 Position title:	身分證: 地址 Address:
7. 姓名:	身分證:
單位職稱 Position title:	地址 Address: