**高雄醫學大學教職員工英文服務證明申請表**

**Application Form of Employee Certificate for Faculty/Staff**

 申請日期(Date of Application):

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| --- | --- | --- | --- |
| 中文姓名Chinese Name |  | 英文姓名Name in English | (同護照寫法) |
| 服務單位Unit/Dept. |  | 職稱Position/Title |  |
| 員工編號Employee No. |  | 取件聯絡電話Contact Information (Extension No.) |  |
| 申請份數Numbers of Copy | 份（每次至多3份。3 copies per application） |
| 申請用途Application Reason |  |
| 備註Remarks | 如：核敘薪額、服務成績等 If you need specific information (annual salary, evaluation result) remarked in the certificate, please do note it here. |
| 申請人簽章Applicant’s Signature |  | 單位主管Department Director |  |
| **※如需郵寄服務證明，請申請人檢附回郵信封併同本申請單送至人事室人力發展組申請。** |

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| **以下欄位為人事室辦理作業用，申請人及單位請勿填寫。** |
| 擬辦 |  | 審核 |  | 判行 |  |
| 用印 |  | 監印 |  |  |  |
| 簽收人 |  | 日期 |  |