**宏國德霖科技大學107學年度四技申請入學第二階段複試報名表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 申請編號 | 請自行填入複試通知單上之申請編號 | | | | | | | | 申請系組 | | | |  | | | | | | | | | | | | | | |
|  | | | | | | | |
| 申請生  姓名 |  | | | | | | 監護人  姓名 | |  | | | | | | | | | | | | 關 係 | | |  | | | |
| 出生  年月日 | 年 月 日 | | | | 性 別 | | □1.男 □2.女 | | | 身分證  字號 | | | |  |  | |  | |  |  | |  |  | |  |  |  |
| 申請生 | 聯絡電話 | |  | | | | | 監護人 | | | | 聯絡電話 | | | | | |  | | | | | | | | | |
| 行動電話 | |  | | | | | 行動電話 | | | | | |  | | | | | | | | | |
| 郵遞區號 | □□□-□□ | | | 通訊地址 | |  | | | | | | | | | | | | | | | | | | | | | |
| 報名資格 | 立　　　　　　　學校 | | | | | | 科  組 | | | | □1.畢業 □2.肄業 □3.結業 □4.其他 | | | | | | | | | | | | | | | | |
| 肄業起迄年月 | 自　　　年　 月至　　　年　 月 | | | | | | | | | 畢業時間/  預定畢業時間 | | | | | 民國　　　年　　　月 | | | | | | | | | | | |
| 學制 | □1.高級中學 □2.完全中學 □3.綜合高中 □4.其他 | | | | | | | | | | | | | | | | | | | | | | | | | |
| **本表確係本人親自填寫，報名資格完全符合簡章規定，如有不實之處，願受取消錄取資格之處分。** | | | | | | | | | | | | | | | | | | | | | | | | | | | |