



ALHAMBRA Medical University

School of Acupuncture and Oriental Medicine

Mailing Address: 55 S. Raymond, Suite 105, Alhambra, CA. 91801

Admission Office: Tel: (626) 289-7719, Fax: (626) 289-8641

中醫針灸碩士班

APPLICATION FOR ADMISSION

入學申請書

I. Applicant Plan to Enroll (申請人計劃入學) : Student ID (學號 _____)

20 ____ Winter Quarter (冬季班) 20 ____ Spring Quarter (春季班)

20 ____ Summer Quarter (夏季班) 20 ____ Fall Quarter (秋季班)

II Program (專業) : Master of Science in Acupuncture & Oriental Medicine

II. Student Information (學生個人信息) :

1. Full Legal Name (全名)

Last (Family) 姓

First 名

Middle

2. E-Mail Address (電子郵件信箱)

3. Mailing Address (郵寄地址)

Number (街道號)

Street (街道名稱)

Apt. No. (公寓號)

City (城市)

State (州)

ZIP Code (郵編)

Home Phone Number (住宅電話) Work (工作電話)

Mobile (手機號)

4. Emergency Contact (緊急聯絡方式)

Name (名字)

Relationship (關係)

Phone Number (電話號碼)

5. Your Place of Birth (你的出生地)

City (城市)

State (州)

Country (if not USA) (國家)

6. Gender 性別

Male (男)

Female (女)

7. Date of Birth 出生日期 Mo (月) ____ Date (日) ____ Year (年) ____

8. Social Security No. (社安號) ____ - ____ - ____

9. **Are you a U.S. Citizen?** (是美國公民嗎?) YES 是 NO 否
 If not a U.S. Citizen, your current immigration status is? 如果你不是美國公民, 你目前的簽證是什麼?
Permanent Resident 永久居民 F-1 (International Student) 國際學生 Other- (Please Specify _____) 其它 (請註明)

10. **Is English your native language?** 英語是你的母語嗎? YES 是 NO 否

11. **List all colleges/universities in order of attendance most recent first.** (列出近期所就讀的大學)

Name 名稱	Year Attended 就讀日期	Major 專業	Degree 學歷
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Name 名稱	Year Attended 就讀日期	Major 專業	Degree 學歷
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12. Were you ever required to leave any college, graduate or professional school or denied admission because of academic performance or conduct?
 你曾經因為學習表現不好而要求離開學校或被學校拒絕嗎?
 No 否 Yes Please describe: (如果回答“是”, 請說明原因)

13. Have you ever been convicted or plead guilty or no contest to a felony or misdemeanor?
 你曾經被定罪或承認有罪, 或沒有為重罪或輕罪辯駁?
 No 否 Yes 是 Please describe 請解釋

14. Do you have any health conditions that require special care, facilities or assistance?
 你有任何因健康狀況需要特殊照顧、特殊設施或幫助的嗎?
 No 否 Yes 是

15. **Please provide the following information for statistical purposes only** (下列信息只用作統計目的):
 White/Non-Hispanic (白人或非西班牙裔)
 Asian / Pacific Islander (亞裔)
 Hispanic (西班牙裔)
 Native American / Alaska Native (美洲印第安人/愛斯基摩人)
 African American (美國黑人)
 Other (其它族裔)

Signature of Applicant

Date