

轉讀課程申請附表

一. 學習情況摘要

本人_____，學生編號：_____，申請於20____/20____學年轉讀至_____學士學位課程_____專業(如適用)，本人清楚知道有關轉讀課程的申請資格及條件(詳述於本學年之學生手冊「學籍管理」-「轉換課程或專業」)，並在此提供本人現就讀_____學士學位課程的學習情況如下：

- 各科成績已公佈，學年累計平均積點(GPA)為_____。數學高考成绩為_____分(內地生適用)。
- 各科成績仍未全部公佈，截至現時為止，學年累計平均積點(GPA)為_____。數學高考成绩為_____分(內地生適用)。
- 已選修_____學期暑期短學期課程，並知悉此學期的成績不納入轉讀課程申請的審批條件。

文化科	修讀情況 科目編號 - 學分(成績等級*)	平均積點(GPA)= $\frac{\sum(\text{科目之學分} \times \text{變換積點})}{\sum \text{科目之學分}}$
英文科	<input type="checkbox"/> 尚未修讀任何科目 <input type="checkbox"/> 已修讀科目 _____ - _____ () _____ - _____ () _____ - _____ () _____ - _____ ()	
中文科	<input type="checkbox"/> 尚未修讀任何科目 <input type="checkbox"/> 已修讀科目 _____ - _____ ()	
數學科 (包括高等數學、管理 數學及數學與邏輯)	<input type="checkbox"/> 尚未修讀任何科目 <input type="checkbox"/> 已修讀科目 _____ - _____ () _____ - _____ ()	

*若個別科目成績尚未公佈，成績等級括號內應填寫『待定』。

本人確認摘要表中所提供的資料真實無誤，並聲明已知悉及明白『[澳門科技大學個人資料收集聲明](#)』的內容。同時，本人清楚明白最終如有任何一項不符合申請轉課程資格及條件，將一律不獲大學批准轉讀課程，已繳交轉課程之行政手續費亦不獲退還或轉讓。

學生簽署確認：  _____

日期： _____

二. “乙型肝炎疫苗接種證明”補交聲明 (非醫學類課程學生申請轉讀醫學類課程適用)

本人_____，學生編號：_____，在此承諾將於轉換課程申請期限內(即本年7月8日或之前)補交乙型肝炎疫苗接種證明至註冊處。若限期前不遞交有關疫苗接種證明，本人明白並接受是次轉讀課程的申請將不獲處理，已繳付之轉讀課程行政手續費亦不獲退還或轉讓。

學生簽署確認： _____

日期： _____

Application for Transfer of Program - Appendix

I. Academic Summary

I _____, Student No. : _____, apply to transfer to the program of Bachelor of _____ - _____ major (if applicable) from the Academic Year 20____/20____. I have understood the qualification for application and requirements for program transfer specified in 「Management of Student Status」-「Transfer of Program/Major」 in the current Student Handbook, and hereby provide my academic summary in the program of Bachelor of _____ as below:

- All the course results have been released, cumulative GPA is _____. National College Entrance Examination (Gaokao) score on Mathematics is _____ (for Mainland students)
- Not all the course results have been released. Up to now, the cumulative GPA is _____. National College Entrance Examination (Gaokao) score on Mathematics is _____ (for Mainland students)
- Have taken _____ Summer Semester course(s), and I acknowledge that such grades **will not be included** in the requirements of the application for transfer of program.

Subjects	Results Overview Course Code - Credits (Grade*)	Grade Point Average(GPA)= $\frac{\sum(\text{Course Credits} \times \text{Grade Point})}{\sum \text{Course Credits}}$
English	<input type="checkbox"/> Have not yet taken any courses <input type="checkbox"/> Have taken _____ - _____ () _____ - _____ () _____ - _____ () _____ - _____ ()	
Chinese	<input type="checkbox"/> Have not yet taken any courses <input type="checkbox"/> Have taken _____ - _____ ()	
Mathematics (including Advanced Mathematics, Business Mathematics, Mathematics and Logic)	<input type="checkbox"/> Have not yet taken any courses <input type="checkbox"/> Have taken _____ - _____ () _____ - _____ ()	

* If course results have not yet been released, Grade recorded inside the brackets should be 『Pending』

I declare that the information provided in this form is true and correct; I have also acknowledged and understood the [Macau University of Science and Technology Personal Data Collection Statement](#). Meanwhile, I acknowledge and understand that if I fail to meet any one of the requirements for transfer of program, my application will not be approved by the University and the fee paid will not be refunded or transferred.

Signature of Student :  _____

Date : _____

II. Statement for Submission of “Proof for Hepatitis B vaccination” (applicable to non-medical program students applying for transfer to medical programs)

I _____, Student No. : _____, hereby promise to submit the proof of Hepatitis B vaccination to the Registry within the application period (**on or before 8th July**). I acknowledge and understand that if I fail to submit such proof by the deadline, this application will not be processed and the paid application fees will not be refunded or transferred.

Signature of Student : _____

Date : _____