

## 2024赴中国临床见习申请表

# **Application Form for Clinical Internship in China 2024**

1. 本人简况 Personal Information					
姓名 Name					
中文 Chinese phonetic transcription					
英文 Name in English					
性别 Sex					
出生日期 (日/月/年)					
Date of birth (day/mo	onth/year)				
出生地 Place of birth					
婚姻状况 Marital stat	us				
国籍 Nationality					
护照号码 Passport nu	mber				
永久通讯地址 Permanent address					
电话 Phone number					
紧急情况的联系方式及联系人 Emergency contact person and details					
2. 在安大略中医学院学习情况 Study Status at OCTCM					
主修专业			┗ □□ 高级中医师		
Field of study	ACUPUNCTURE	TCMP	ADVANCED TCM		
入学时间 Program Sta	!	TOWN	ADVANCED ICIVI		
现在是第几学期	art Date				
Which semester are	vou in?				
Timon demedies die you in.					
3. 以往受教育情况 Previous Education					
请按时间先后填写本人最后学历					
List in chronological order your main educational background					
学校	在校时间 (自/至)	所获文凭	主修专业		
School attended	Years (from/to)	Diploma received	Field of study		

4. 现有汉语水平 Current Chinese Language Level					
	很好 Excellent	好 Good	一般 Basic	不会 None	
阅读 Reading					
听力 Listening					
口语 Speaking					

### 5. 签证 Visa

持有加拿大护照者,必须申请中国签证。如有需要,学院可以帮忙办理。

Canadian passport holders must apply for or have a valid Chinese visa. The college can assist if needed.

#### 6. 保险 Insurance

中方要求必须有旅游保险,个人负责上旅游保险,并将复印件给学院。

Chinese regulations require travel insurance. Students are responsible for obtaining travel insurance and providing a copy to the college.

#### 7. 注意事项 NOTICE

申请人保证 I hereby affirm that:

- a) 上项各项中所提供的情况真实无误。
  - All the information given in this form is true and correct.
- b) 我作为一名学生, 保证在学习期间将遵守中国政府的法律、法规和规章制度, 尊重教学安排。

As a student, I promise that I will abide by the laws, regulations and rules of the Chinese government, and respect the teaching arrangements.

c) 保证交纳学费及住宿费。因自身原因, 造成学习期间中断, 一概不向校方索退已经交纳的学费。

I guarantee payment of tuition and accommodation fees. If the study period is interrupted due to one's own reasons, the tuition fees paid will not be refunded from the school.

#### 8. 免责声明 Disclaimer

本人赴中国期间, 其财物丢失, 人生意外情况的发生, 均与安大略中医学院无关。特此免责声明!

I acknowledge there may be loss of personal belongings or unexpected incidents that may occur during my stay in China. This disclaimer is to declare that the Ontario College of Traditional Chinese Medicine is not related to these matters.

申请人签名	申请日期
SIGNATURE	DATE