

Attachment 1-1

## 2025 International Foundation Program Application Form (International Students use only)

|  |  |  |                                    |   |  |
|--|--|--|------------------------------------|---|--|
| <p><b>【Programs of Study】</b></p> <p>Check and fill in the boxes with number 1 to 3 to indicate your priority</p> <p>(Each applicant may apply up to 3 programs)</p> | <div> <input type="checkbox"/> Horticulture and Biotechnology             <input type="checkbox"/> Animal Science         </div> <div> <input type="checkbox"/> Forestry and Nature Conservation             <input type="checkbox"/> Chemical and Materials Engineering         </div> <div> <input type="checkbox"/> Electrical Engineering             <input type="checkbox"/> Mechanical Engineering         </div> <div> <input type="checkbox"/> Department of Textile Engineering         </div> <div> <input type="checkbox"/> Computer Science and Information Engineering         </div> <div> <input type="checkbox"/> Tourism Management             <input type="checkbox"/> Marketing             <input type="checkbox"/> Advertising         </div> <div> <input type="checkbox"/> Urban Planning and Development Management         </div> <div> <input type="checkbox"/> Architecture and Urban Design         </div> <div> <input type="checkbox"/> Landscape Architecture + Environmental Planning         </div> |  |                                    |   |  |
| <p>Interview Language for Online Proficiency</p>   | <input type="checkbox"/> Chinese <input type="checkbox"/> English <input type="checkbox"/> Native Language : _____   |  |                                    |   |  |
| <p>First Name</p>  |  |  | <p>Last Name</p>                   |   |  |
| <p>Nationality</p>   |  |  | <p>Passport Number</p>             |   |  |
|  |  |  | <p>ID Number (of your country)</p> |   |  |
| <p>Date of Birth</p>   | <p>(YYYY/MM/DD)</p>  |  | <p>Gender</p>                      | <input type="checkbox"/> Male <input type="checkbox"/> Female |  |
| <p>Place of Birth (City)</p>   |  |  | <p>E-mail</p>                      |   |  |
| <p>LINE ID</p>   |  |  | <p>What's App ID</p>               |   |  |
| <p>Home Phone Number: _____</p>  |  |  | <p>Mobile No. : _____</p>          |   |  |
| <p>Correspondence Address<br/>(Please write in English)</p>  |  |  |                                    |   |  |
| <p>Guardian/Emergency Contact</p>  | <p>Full Name</p>   |  |                                    | <p>Relationship</p>   |  |
|  | <p>Email</p>   |  |                                    | <p>Telephone</p>  |  |
|  | <p>Address</p>   |  |                                    |   |  |
| <p>Educational Background (學歷): Highest Academic Degree Obtained</p>   |  |  |                                    |   |  |
| <p>Name of Institute</p>   |  |  |                                    |   |  |
| <p>Location (City,Country)</p>   |  |  | <p>Major</p>                       |   |  |
| <p>Duration</p>  | <p>From (M/Y) _____ to (M/Y) _____</p>   |  | <p>Degree</p>                      |   |  |