附件1 重庆医科大学2021年依据台湾地区大学入学考试学科能力测验成绩招收台湾高中毕业生**申请表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名（中文） | | |  | | | 性 别 | | | |  | | | | | 贴一寸彩色  免冠照片 | |
| 身份证号码 | | |  | | | 出生日期 | | | |  | | | | |
| 台胞证号码 | | |  | | | 出 生 地 | | | |  | | | | |
| 现就读学校 | | |  | | | | | | | | | | | |
| 通讯地址 | | |  | | | | | | | | | | | |
| 联系电话（含区号） | | |  | | | | | 移动电话 | | |  | | | | | |
| 传真号码 | | |  | | | | | 电子邮件 | | |  | | | | | |
| * **中学教育情况** | | | | | | | | | | | | | | | | |
| 就读中学名称 | | | 国家  （地区） | | | 时 间 | | | | | | 受教育程度 | | | | |
| 开始时间 | | | | 终止时间 | |
|  | | |  | | |  | | | |  | |  | | | | |
|  | | |  | | |  | | | |  | |  | | | | |
|  | | |  | | |  | | | |  | |  | | | | |
| * **家庭主要成员情况** | | | | | | | | | | | | | | | | |
| 称谓 | 姓名 | | | | 工作单位 | | | | | | | | | 联系电话 | | |
| 父 |  | | | |  | | | | | | | | |  | | |
| 母 |  | | | |  | | | | | | | | |  | | |
| * **台湾地区大学入学考试学科能力测验成绩（请附考生成绩通知单影印本）** | | | | | | | | | | | | | | | | |
| 科 目 | | 国文 | | 英文 | | | 数学 | | 社会 | | | | 自然 | | | 备注 |
| 成 绩 | |  | |  | | |  | |  | | | |  | | |  |
| 实得级分 | |  | |  | | |  | |  | | | |  | | |  |
| 级 距 | |  | |  | | |  | |  | | | |  | | |  |
| 标 准 | |  | |  | | |  | |  | | | |  | | |  |
| 总 级 分 | |  | | 标准 | |  | | | | 报名序号 | | |  | | | |
| * **选报专业 （请根据附件2，按专业选择意愿顺序填写）** | | | | | | | | | | | | | | | | |
| 第一专业志愿 | | |  | | | | | | | | | | | | | |
| 第二专业志愿 | | |  | | | | | | | | | | | | | |
| 第三专业志愿 | | |  | | | | | | | | | | | | | |
| * **个人陈述** | | | | | | | | | | | | | | | | |
| 说明：请更多的向我们介绍你自己，内容包括你对大学学习生活等方面的计划和设想、选择医学的理由、你的职业规划、希望到重庆医科大学深造的原因等等。可另行附页。 | | | | | | | | | | | | | | | | |