**2023 National Applied Research Laboratories Internship Program**

**for Foreign Master and PhD Students**

**Application Form**

(Please type all answers)

**Personal Information**

**Full Name** (LAST NAME, First name and Middle Name)**:**

**Sex:**

**Date (mm/dd/yyyy):**

**Place of birth:**

**Nationality:**

**Current address:**

**Telephone number:**

**E-mail address 1:**

**E-mail address 2:**

**Current Studies**

**Address of Academic Institution:**

|  |  |
| --- | --- |
| Institution | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Department | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Address | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Current Degree Program: Master □ PhD □**

**Field of study:**

**Positions and Awards in the Last Three Years**

Please list all positions held and awards received in the last three years.

**Description of Current Studies**

Provide a summary of your current studies, research projects and interests. Please write the summary for a technical audience and identify both a general field of study and any specific research interests. Please do not exceed one page.

**Statement of Purpose**

Explain your unique qualifications for participation in this program and list the benefits the program will provide to your professional development. Please do not exceed one page.

**Host Research Centers**

Rank the research centers (up to a maximum of 3) most relevant to your field of study with 1 being the most relevant. Please note that our research centers are located throughout Taiwan in Taipei, Hsinchu, Taichung, Tainan and Kaohsiung. The centers with more than one location will assign students based on need and relevance of the student’s field of study. Once assigned, the host research center cannot be changed.

\_\_\_\_National Laboratory Animal Center (NLAC)

 <http://www.nlac.org.tw/eng/index.asp>

\_\_\_\_National Center for Research on Earthquake Engineering (NCREE)

 <https://www.ncree.narl.org.tw/>

\_\_\_\_National Center for High-performance Computing (NCHC)

 <https://www.nchc.org.tw/?langid=2>

\_\_\_\_Taiwan Semiconductor Research Institute (TSRI)

 <https://www.tsri.org.tw/en/index.html>

\_\_\_\_Taiwan Instrument Research Institute (TIRI)

 <https://www.tiri.narl.org.tw/>

\_\_\_\_Science and Technology Policy Research and Information Center (STPI)

 <https://www.stpi.narlabs.org.tw/indexEn.htm>

\_\_\_\_Taiwan Ocean Research Institute (TORI)

 <https://www.tori.narl.org.tw/ETORI/eDefault.aspx>

**Letters of Recommendation**

A minimum of two recommendation forms is required. At least one letter of recommendation must be from one of your current professors.

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| Name | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Institution | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Department | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| E-mail address | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Telephone |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| Name | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Institution | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Department | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| E-mail address | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Telephone |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**I have read this program announcement and application guidelines in detail and if accepted, agree to comply with the conditions stated herein. In addition, I certify that the information provided on this application is true, complete and accurate.**

**Date:**

**Signature of the Applicant:**

(Please scan if sending by e-mail)