

# 澳門鏡湖護理學院

KIANG WU NURSING COLLEGE OF MACAU

## 教學人員職位申請表

APPLICATION FORM FOR ACADEMIC POSITION

照片

Photo

請以正楷填寫以下內容 Please write in BLOCK letters

| 1 申請職位資料 Information of job applied for |                                                                                        |                                  |                                                                                |
|-----------------------------------------|----------------------------------------------------------------------------------------|----------------------------------|--------------------------------------------------------------------------------|
| 申請職級<br>Job Position                    | <input type="checkbox"/> 教授 Professor <input type="checkbox"/> 副教授 Associate Professor |                                  | <input type="checkbox"/> 全職 Full-time<br><input type="checkbox"/> 兼職 Part-time |
|                                         | <input type="checkbox"/> 助理教授 Assistant Professor <input type="checkbox"/> 講師 Lecturer |                                  |                                                                                |
|                                         | <input type="checkbox"/> 臨床教師 Clinical Instructor                                      |                                  |                                                                                |
|                                         | <input type="checkbox"/> 其他 Others _____                                               |                                  |                                                                                |
| 要求待遇 (年薪)<br>Expected Annual Salary     | 澳門幣<br>MOP\$ _____                                                                     | 可到任日期<br>Date of assuming office |                                                                                |

| 2 個人資料 Personal Particulars            |                                                                      |                                        |                                                                                                                    |
|----------------------------------------|----------------------------------------------------------------------|----------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| 中文姓名<br>Name in Chinese                |                                                                      | 英文姓名/譯名<br>Name in English/Translation |                                                                                                                    |
| 國籍/籍貫<br>Nationality                   |                                                                      | 來自國家<br>Country                        |                                                                                                                    |
| 出生日期<br>Date of Birth                  |                                                                      | 出生地點<br>Place of Birth                 |                                                                                                                    |
| 性別<br>Gender                           | <input type="checkbox"/> 男 Male<br><input type="checkbox"/> 女 Female | 婚姻狀況<br>Marital Status                 | <input type="checkbox"/> 未婚 Single <input type="checkbox"/> 已婚 Married<br><input type="checkbox"/> 其他 Others _____ |
| 證件類別<br>Type of ID Document            | 本地身份證 B.I.R.                                                         | 編號 No.                                 |                                                                                                                    |
|                                        | 其他國家/地區身份證<br>Other Country ID                                       | _____ 編號 No.<br>國家 Country             |                                                                                                                    |
|                                        | 通行證 Chinese Visa                                                     | 編號 No.                                 |                                                                                                                    |
|                                        | 護照 Passport                                                          | _____ 編號 No.<br>國家 Country             |                                                                                                                    |
| 永久住址<br>Permanent Address              |                                                                      |                                        |                                                                                                                    |
| 澳門住址<br>Address in Macau               |                                                                      |                                        |                                                                                                                    |
| 澳門聯絡電話<br>Contact Tel. Number in Macau |                                                                      | 其他聯絡電話<br>Other Contact Tel. Number    |                                                                                                                    |
| 電郵地址<br>E-mail Address                 |                                                                      |                                        |                                                                                                                    |

**3 學歷 Academic Qualifications** (請順序列出 in chronological order)

| 由From<br>月/年 M/Y | 至To<br>月/年 M/Y | 教育機構<br>Education Institution | 所在國家<br>Country | 修讀專業<br>Specialization | 學位<br>Degree Obtained |
|------------------|----------------|-------------------------------|-----------------|------------------------|-----------------------|
|                  |                |                               |                 |                        |                       |
|                  |                |                               |                 |                        |                       |
|                  |                |                               |                 |                        |                       |
|                  |                |                               |                 |                        |                       |

**4 專業資格/培訓 Professional Qualifications/Training Courses** (請順序列出 in chronological order)

| 由From<br>月/年 M/Y | 至To<br>月/年 M/Y | 課程名稱<br>Course Name | 專業資格<br>Professional Qualifications Obtained | 頒發機構<br>Issuing Authority |
|------------------|----------------|---------------------|----------------------------------------------|---------------------------|
|                  |                |                     |                                              |                           |
|                  |                |                     |                                              |                           |
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|                  |                |                     |                                              |                           |

**5 語言能力 Language Proficiency**

|                        |                                     |                                |                                |                               |
|------------------------|-------------------------------------|--------------------------------|--------------------------------|-------------------------------|
| 廣東話 <i>Cantonese</i>   | <input type="checkbox"/> 優Excellent | <input type="checkbox"/> 良Good | <input type="checkbox"/> 中Fair | <input type="checkbox"/> 劣Bad |
| 普通話 <i>Mandarin</i>    | <input type="checkbox"/> 優Excellent | <input type="checkbox"/> 良Good | <input type="checkbox"/> 中Fair | <input type="checkbox"/> 劣Bad |
| 英語 <i>English</i>      | <input type="checkbox"/> 優Excellent | <input type="checkbox"/> 良Good | <input type="checkbox"/> 中Fair | <input type="checkbox"/> 劣Bad |
| 其他 <i>Others</i> _____ | <input type="checkbox"/> 優Excellent | <input type="checkbox"/> 良Good | <input type="checkbox"/> 中Fair | <input type="checkbox"/> 劣Bad |

**6 教學經驗 Teaching Experience** (請順序列出 in chronological order)

| 由From<br>月/年 M/Y | 至To<br>月/年 M/Y | 全職<br>Full-time | 兼職<br>Part-time | 教育機構<br>Education Institution | 所在國家<br>Country | 任教科目<br>Subject(s) taught | 職稱<br>Title |
|------------------|----------------|-----------------|-----------------|-------------------------------|-----------------|---------------------------|-------------|
|                  |                |                 |                 |                               |                 |                           |             |
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|                  |                |                 |                 |                               |                 |                           |             |

**7 工作經驗 Working Experience** (請順序列出 in chronological order)

| 由From<br>月/年 M / Y | 至To<br>月/年 M / Y | 全職<br>Full-time | 兼職<br>Part-time | 機構名稱<br>Name of Employer | 職位<br>Position held | 年薪<br>Annual Salary | 離職原因<br>Reasons for leaving |
|--------------------|------------------|-----------------|-----------------|--------------------------|---------------------|---------------------|-----------------------------|
|                    |                  |                 |                 |                          |                     |                     |                             |
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|                    |                  |                 |                 |                          |                     |                     |                             |

**8 近期發表著作、論文 Works, Paper or Thesis Recently Published**

另遞交附件，註明年份，書名(或論文)題目及摘要 Please indicate the following information in the attachment(s), including the publishing year, book (or paper) subject title and abstract

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**9 諮詢人(不包括親屬) Referees (excluding relatives)**

| 姓名<br>Name | 職位<br>Position | 電郵地址<br>E-mail Address | 聯絡電話<br>Contact Tel. Number | 關係<br>Relationship |
|------------|----------------|------------------------|-----------------------------|--------------------|
|            |                |                        |                             |                    |
|            |                |                        |                             |                    |

在考慮錄用時，學院或會聯絡上列諮詢人。

Please note that we may contact the above-listed referee(s) at any time during the recruitment process.

**10 以下資料需連同此表格一同遞交Please attach required materials listed below**

- a. 澳門居民身份證副本/其他身份證明文件 Photocopy of B.I.R./other identity document
- b. 學歷證明書副本 Certificate Copies of Education
- c. 工作經驗證明文件 Certified Documents of Professional Experience
- d. 職業培訓證書副本 Certificate Copies of Training Courses
- e. 其他文件 Other Materials

✧ 本人特此聲明上述資料正確無誤，日後倘受聘於貴公司，若發現本人有任何虛報資料，本人明白將可能導致被解僱。

I hereby declare that the information given above is accurate. I understand that I shall render myself liable to dismissal of the appointed post for any fake information provided.

✧ 如個人資料更改時，本人認知更新個人檔案資料之責任。

I acknowledge the responsibility to update my personal file for any change of data involved.

申請人簽名

Signature of Applicant : \_\_\_\_\_

日期

Date : \_\_\_\_\_

(DD/MM/YYYY)

# 澳門鏡湖護理學院

KIANG WU NURSING COLLEGE OF MACAU

提供職位申請人的個人資料授權書

## Employment Reference Check Consent Form

本人\_\_\_\_\_ (姓名)(\_\_\_\_\_ 身份證號碼:\_\_\_\_\_)

現授權在職位申請表上所填報的諮詢人向澳門鏡湖護理學院提供本人的個人資料，包括本人的受職記錄、薪酬記錄、受聘期間的工作表現等，用作評估是次申請之用。

I \_\_\_\_\_, (\_\_\_\_\_ ID No. \_\_\_\_\_)

hereby give consent to referee(s) as stated on my job application form to release my personal information including employment history, salary, job performance etc. to Kiang Wu Nursing College of Macau for the assessment of my job application.

簽 名

日 期

Signature : \_\_\_\_\_

Date : \_\_\_\_\_

(DD/MM/YYYY)