

中央研究院獎助醫學士、牙醫學士進修

聲明 Acknowledgement :

- 接受第一類獎助金者，獎助期間須全時間投入研究。

**Recipients of Type I fellowship must devote full time doing bench research in a laboratory at AS or at a university medical center while receiving the scholarship.**

本人同意獎助期間全時間從事研究工作。

I agree to devote full time doing bench research while receiving the scholarship.

- 接受第二類獎助金者，獎助期間至少 80%時間投入研究。

**Recipients of Type II fellowship must devote at least 80% of his/her time doing bench research in a laboratory at AS or at a university medical center while receiving the scholarship.**

本人同意於醫院服務不超過兩個半日，並於獲得博士學位後，回原機關（構）服務，年限不得少於接受獎助期間，如改調其他機關（構）服務，須經原機關（構）同意。

I agree to work no more than two half-days per week at my present hospital position. I also agree to resume working for my original employer after obtaining the Ph.D. degree for no less than the award period. I understand that any changes of employment require the approval of my original employer.

博士班學位學程(以下簡稱本學程)學生入學後所選擇之指導教授需為本學程之師資。目前「本學程為雙邊指導制」，學生必須於中研院內師資中選定主指導教授進行基礎研究，校方共同指導老師則協助學生進行臨床醫學研究，才得以核發獎助金。

Students who enroll in graduate doctoral program (hereinafter referred to as graduate program) must select one main advisor for basic research training from faculties within Academia Sinica after admission. Currently, we adopt 'bilateral guidance system', in which co-advisor from school-side, on the other hand, would assist students with clinical research training. These conditions are required for issuing scholarships.

本人已詳閱中央研究院獎助醫學士、牙醫學士進修博士實施要點，並同意上述聲明。

I have read and understand the regulation of scholarship for M.D. & D.D.S advanced study program, & accept and agree to all of its terms and conditions.

申請人簽章：

Applicant Signature/Stamp

日期：

Date

聲明 Acknowledgement :

本機構同意申請人於獎助期間以留職原則至中研院（實驗室單位名稱）

實驗室及原機構（實驗室單位名稱）

實驗室

從事研究工作，申請人的臨床工作時數每週不得超過工作時數的百分之二十。獎助期間每月由中研院給與獎助，但獎助最高以新台幣 8 萬元為限。

Our organization agrees to reserve the applicant's position during the award period so that the applicant is able to conduct research in \_\_\_\_\_ Lab at the Academia Sinica or in \_\_\_\_\_ Lab at our organization. We understand that the applicant's clinical obligation should not exceed 20% of his/her work hours per week. Fellowship will provided monthly by the Academia Sinica for up to NT\$80,000.

單位主管簽章：

Department Supervisor

Signature/Stamp

日期：

Date

機構首長簽章：

Organization Chief

Signature/Stamp

日期：

Date