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| **Registration Form for Applicant** |

 |
| **Personal** | Name |   | Date of birth | 　 |
| Address |   | Country of birth |  |
| E-mail | 　 | Mobile number  |   |
| **Education Background** | Stage | Start & End date | Name of School | Major | Degree | Research direction |
| Three year college degree | — | 　 | 　 | - | - |
| Undergraduate | — | 　 | 　 | 　 | - |
| Postgraduate | — | 　 | 　 | 　 | 　 |
| Doctor | — | 　 | 　 | 　 | 　 |
| **Working experience** | Start & End date | Company | Department | Job Title |
| — | 　 | 　 | 　 |
| — | 　 | 　 | 　 |
| — | 　 | 　 | 　 |
| **Second language** | Language： Level： Mark： Time of examination： |
| **Other abilities** |   |
| **Awards** | 　 |
| **Punishment** | 　 |
| Job preference | 　 | Expected salary | 　 |
| **I promise the above content real and valid, if false is willing to afford all the responsibility.**  **Signature：** |