



Application Form for Faculty Position

College of Photonics, NCTU

PERSONAL INFORMATION				
Name:				
	First	Middle, Other	Last (Family)	
Date of Birth (mm/dd/yyyy):	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female			
Passport No.:	Nationality:			
Mobile No.:	Home Tel:			
Email:				
Home Address: (Postal Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>)				
Mailing Address (if different): (Postal Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>)				
Institute to Join:			Position Sought:	
<input type="checkbox"/> Institute of Photonic System			<input type="checkbox"/> Full Professor	
<input type="checkbox"/> Institute of Lighting and Energy Photonics			<input type="checkbox"/> Associate Professor	
<input type="checkbox"/> Institute of Imaging and Biomedical Photonics			<input type="checkbox"/> Assistant Professor	
EDUCATIONAL INFORMATION				
Institution and Country	Study Period (mm/yyyy–mm/yyyy)	Major Subject	Qualification / Degree	Advisor
			<input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> PhD	
			<input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> PhD	
			<input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> PhD	
EMPLOYMENT DETAILS				
Company/Organization Name	Department or Division	Position/Employer	Period of Employment (mm/yyyy–mm/yyyy)	



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AREAS OF SPECIALIZATION (RELATED TO YOUR RESEARCH)				
PUBLICATION RECORDS (Numbers of Publications)				
Total: ____ Journal Papers/Transactions (year ____ ~ year ____); First Author: ____; SCI-indexed: ____				
Books: ____; Book Chapters: ____; Patents Obtained: ____; Patents Pending: ____				
REFERENCES(who to support the recommendation Letters)				
	Name	Position	Company/ Organization	Contact Tel. and Email
1				
2				
3				
COURSE TITLES (Provide 3 ~ 5 courses which can be taught in the College of Photonics, NCTU.)				
 Signature: _____ Date: _____				