



澳門大學
UNIVERSIDADE DE MACAU
UNIVERSITY OF MACAU

持續進修中心

CENTRO DE EDUCAÇÃO CONTÍNUA
CENTRE FOR CONTINUING EDUCATION

報名表格 Application Form

自 1998 年 1 月起, 閣下曾否修讀本中心所舉辦之任何課程? ☐ 是 ☐ 否
Have you studied any course(s) at our centre since January 1998? YES NO

填寫本表格前, 敬請細閱附頁之“申請人須知”。

Please kindly read through the attached “Applicant Guidelines” before completing this form.

相片
Photo

學生編號

Student No. X- - - - -

處理人

Processed by

日期

Date

A. 申請人資料 Applicant's Information

*A1. 英文/葡文姓名

Name in English or
Portuguese,
surname first

(In Block Letters)

中文姓名

Name in Chinese

A2. 性別 Sex

☐ 男 Male

☐ 女 Female

A3. 出生日期 (日/月/年)

Date of Birth (dd/mm/yyyy)

A4. 出生地點

Place of Birth

☐ 澳門 Macau

☐ 香港 Hong Kong

☐ 中國 China

其他國家/地區

Other Country/Region

*A5. 澳門身份證號碼

Macau ID Card No.

其他國家/地區

Other Country/Region

證件號碼

ID No.

A6. 國籍

Nationality

*A7. 聯絡電話

Contact No.

住宅

Home

*手提

Mobile

公司

Office

傳真

Fax

*A8. 電子郵箱

E-mail Address

*A9. 通訊地址

Mailing/

Correspondence

*A10. 第二聯絡人 Second contact person

姓名 Name

聯絡電話 Contact No.

A11. 若申請者為澳門大學的職員、學生或校友, 請填寫以下空格:

If you are UM staff member, UM existing student or UM Alumni, kindly fill out the following:

☐ 澳門大學職員 UM Staff

職員編號

Staff No.

所屬部門

Department

☐ 澳門大學在學學生 UM Existing Student

就讀學院

Faculty enrolled in

主修

Major

☐ 澳門大學校友 UM Alumni

B. 學歷程度 Educational Level

請在你獲得最高學歷之方格內加上✓號: Please tick/check the appropriate box for your highest educational level attained:

☐ 小學 Primary School

☐ 高中 High School

☐ 大學或以上 Bachelor or Above

☐ 初中 Junior High School

☐ 文憑 Diploma

☐ 其他 Others

* 為必填項目 Required Field

C. 報讀課程 Course applied for

課程編號 Course Code	課程名稱 Course Title	費用 Fees (澳門幣 MOP)
1		
2		
3		
小計 Sub Total:		
報名費 Application Fee:		
總計 Grand Total:		

D. 課程資料取得途徑 How did you receive the course information?

- ☐ 報章 Newspaper ☐ 互聯網 Internet ☐ 朋友 Friends ☐ 現職公司 Your company
☐ 親臨索取 In Person ☐ 書局 Bookstore ☐ 其他 Others _____

E. 聲明 Declaration

E1. 本人聲明，此報名表格及附件所載之一切資料，均屬真確。如有虛假，持續進修中心可隨時取消本人之申請及終止本人就讀之課程，並聲明已知悉及明白《澳門大學 / 澳門大學持續進修中心收集個人資料聲明》(澳門大學為了提供申請人所要求的相關行政服務，要求申請人填寫此申請表並遞交至持續進修中心。所有在表內收集的個人資料，本中心將只用作上述用途。而這些個人資料亦可在澳門大學內部及其他依法律規定或獲閣下授權的實體之間傳遞，以進行相關程序處理。如申請人未能填申請表上所須提供的有關身份識別及與教育活動相關的資料，其申請將不獲處理。如欲修改閣下存於大學的個人資料，閣下可向持續進修中心提出申請。) I declare that all information given in this application form and the attached documents is true and correct to the best of my knowledge. I understand that CCE reserves the rights to disqualify my application and to annul my privilege to attend classes at any time if any information provided here is proved to be false and ingenuine. I declare I have acknowledge and understand the <Personal Data Collection Statement of the University of Macau / the Centre for Continuing Education of the University of Macau> (The University of Macau, in accord to the purpose of providing the related administrative services requested by applicants, requires applicants to fill in this application form and submit to the Centre for Continuing Education. The personal data collected in the form will only be used for the mentioned purpose and may also be transferred within the University and to entities that are in accordance with legal provision or with your prior consent, for the purpose of carrying out the related procedures. The application will not be proceeded if applicants fail to fill in any of the mandatory fields as required in the application form in accord to the personal-identification and education-related information. To make correction of your personal data held by the University, students can submit the request to the Centre for Continuing Education.)

E2. 本人同意，如本人註冊入學，當遵守大學及中心之規例。

I consent that if registered, I will conform to the regulations of the University and the CCE.

E3. 如報讀之課程屬合辦課程，本人同意持續進修中心將此報名表格及附件所載的資料，交予合辦相關課程之機構/公司，作課程行政程序之用。 I consent that, if the course I registered is jointly organized by CCE and other institutes/organizations, my personal data on the application forms and attachments can be disclosed to the concerned institutes/organizations for the administrative purposes.

E4. 請聲明(✓)Please indicate (✓):

本人願意 () 以電郵登記及以電子形式接收持續進修中心的最新資訊。

I would like () to register by email and receive latest news electronically from Centre for Continuing Education.

本人願意 () 以電郵登記及以電子形式接收與持續進修中心合作機構之最新資訊。

I would like () to register by email and receive latest news electronically from coorganizer(s) with Centre for Continuing Education.

申請人簽署' Applicant's Signature: _____ 日期 Date: _____
 (需與身份證件上簽名一致 Please sign the same as your identification document.)

本中心使用 For Office Use Only	
付款方式 Payment Method: 信用卡號碼 Credit Card N°:	澳門大學收據編號 UM Receipt N°:
支票號碼 Cheque N°: 銀行名稱 Name of Bank:	處理人 Processed by:
本票號碼 Cashier's Order N°: 銀行名稱 Name of Bank:	日期 Date:
其他 Others	