

National Taipei University Application Form for Master's Thesis Defense

(Applicable to students admitted starting from 2017 Academic Year.)

Valid from 2024.02.01

| Name | Student ID | Department/Degree Program | Thesis Topic | Thesis Advisor |
|------|------------|---------------------------|--------------|----------------|
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- I've fulfilled the graduation credit requirements, and all grades are submitted. (_____ credits in total).
- I need to obtain _____ additional credits, and I commit to adhering to the academic regulations of the department, degree program, and Article 11 of National Taipei University's graduation regulations for Master's and Doctoral degrees.
- I've adhered to Article 3 of Academic Research Ethics Education by independently studying through the Center for Taiwan Academic Research Ethics Education website and passing the general examination to attain course certification.
- I've verified with the advisor that the thesis topic and content align with the professional field.

Thesis Advisor: _____ (Signature)
Applicant: _____ (Signature)

Subject: The courses and credits completed by the aforementioned master's student will comply with the regulations of the department, degree program, and Article 11 of National Taipei University's regulations for master's and doctoral degrees. The thesis has been written, and the student **has obtained the certification by engaging in self-learning through the Taiwan Academic Research Ethics Education Center website and passed the comprehensive examination.** The student **has confirmed with the advisor that the thesis topic and content align with the professional field** and has been granted permission to participate in the thesis defense. The recommended members for the examination committee are listed below. We kindly request your approval and issuance of appointment letters.

I. Exam Committee Members (Please include the thesis advisor in the list if they serve as one of the committee.)

| Name | Service Unit | Job Title | Qualifications of the Exam Committee Member (Please check) | | | Note |
|------|--------------|-----------|---|--|--|------|
| | | | Faculty or academician eligible for the position of a degree examination committee member | Individuals with a doctoral degree and notable academic achievements | Members for rare or specialized examination committees | |
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II. Exam Date/Time: (Year) _____ (Month) _____ (Day) _____ (Time)

III. Exam Venue: Room _____ in _____ College/Department

IV. Appointed examination committee members, if they themselves or their spouse, former spouse, blood relatives within the fourth degree, or in-laws within the third degree, have or had a personal relationship, are required to recuse themselves from the duties related to the committee.

V. To complete the graduation credits for this semester, the required credits must be graded by the instructor and meet the passing criteria before proceeding with the school leaving procedures.

Applicant: _____ (Signature) (Year) _____ (Month) _____ (Day)

To : Thesis Advisor: _____ (Signature)

【Registration Section】 Have obtained a certificate in academic research ethics education.

Departmental Director: _____ (Signature)

Have not obtained the certificate of completion in academic research ethics education.

Contact Person: _____ (Signature)

【The submission process: Department or degree program's approval → 2 copies of application to the Curriculum Section → Registration Section. (one copy sent to the department, one copy retained by the Curriculum Section).】

Note : After department and degree program approval on hard copy, log in to the could for funding authorization registration.