国际学生导师同意指导函

**Acceptance Letter for International Student**

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| |  | | --- | | 申请人信息 **Applicant Information** | | | | | | |
| |  | | --- | | 护照姓名  **Passport Name** | | |  | | --- | | 护照号码 **Passport No.** | | | |  | | --- | | 申请类别  **Program Applied** | | | |  | | --- | | 申请专业  **Major Applied** | |
|  |  | | |  | | --- | | **□**研究生**Master**  **□**博士生 **PhD** | | |  |
| |  | | --- | | 意向导师信息 **Supervisor Information** | | | | | | |
| 姓名 **Name** | | |  | | --- | | 电子邮箱 **Email Address** | | | 联系电话  **Telephone Number** | |
|  | |  | |  | |
| 所在院系  **College** | | 所在科室  **Department** | | 职称、职务  **Occupation** | |
|  | |  | |  | |
| |  | | --- | | 若该生能够被中国医科大学正式录取，我愿意作为该生的（□硕士生□博士生）导师，对其在中国医科大学期间的学业进行指导。  If the student officially enrolls in China Medical University, I am happy to be his/her（□Master □PhD）supervisor.  导师签字/ Signature： |  |  | | --- | | 年/Year 月/Month 日/Day | | | | | | |