

K. CONTACT PERSON, IN CASE OF AN EMERGENCY	Name:	Relationship:
	Address:	
	Telephone:	E-mail:

2. LANGUAGE PROFICIENCY

LANGUAGE PROFICIENCY	COMPREHENSION			READING			WRITING			SPEAKING		
	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair
ENGLISH												
Other (please state: Chinese, French, Spanish or...)												

3. COURSES

• **Mark the course you wish to participate in:**

- Analog Design Essentials & Power Management IC Design in CMOS BCD Technologies
 Full-Custom IC Design & Silicon Photonics Design Analysis
 Full-Custom IC Design & CMOS MEMS IC Design
 Cell-based IC Design

• **Are you interested in doing a 1-month internship after the course?**

- Yes No

4. EDUCATION BACKGROUND

• **Are you currently enrolled at a university (undergraduate, master or PhD)?** Yes No

Level	Name of Institution	Department	City/Country	Period of Enrollment (mm/yyyy-mm/yyyy)
Undergraduate Education				
Graduate Education				
Other				

5. PREVIOUS EMPLOYMENT (Use one line for each position)

Position	Company/Organization	Period of Employment	Responsibilities

6. PRESENT EMPLOYMENT

A. COMPANY/ ORGANIZATION		
B. POSITION		C. From (mm/yy)
D. CONTACT INFORMATION	Address :	
	E-mail :	Tel :
E. TYPE OF ORGANIZATION	<input type="checkbox"/> Govt. Ministry/ Agency <input type="checkbox"/> Govt./ State-owned Enterprise <input type="checkbox"/> University/ Research Institution <input type="checkbox"/> NGO <input type="checkbox"/> Locally-owned enterprise <input type="checkbox"/> Foreign-owned Enterprise <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other: _____	

7. PLEASE BRIEFLY STATE THE REASONS FOR APPLICATION

8. DECLARATION:

I declare that:

- The information I have given on this application is complete and accurate to the best of my knowledge.
- I consent to the processing of my personal data included in this application form by the Taipei Representative Office in Poland for the purpose of the application process for the 2024 Taiwan Semiconductor Summer Training Program.

Applicant's Signature:

Date: _____ / _____ / _____ (dd/mm/yyyy)