



Spring Semester 2012

**National Taipei University of Nursing and
Health Sciences**

**International Programs
International Programs**

International Health and Nursing Administration Undergraduate Program

International Nursing Master of Science Program

International Health and Nursing Administration Undergraduate Program:

<http://cham.ntunhs.edu.tw/files/13-1012-2336.php>

International Nursing Master of Science Program:

<http://140.131.87.87/nursing-new/eng/>

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International Nursing Master of Science Program

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Introduction of University

National Taipei University of Nursing and Health Sciences (NTUNHS) is located on 365, Ming Te Road, Peitou District, Taipei, Taiwan. Founded in 1954, NTUNHS was first known as “Taiwan Provincial Junior College of Nursing.” In August 1994, it was upgraded as fully-fledged college and became the first independent nursing college in Taiwan. Upon the demand for nursing taskforce, NTUNHS has pioneered the nursing and healthcare education in Taiwan. As of the 2009 academic year, NTUNHS has a total of three schools, five departments and twelve graduate institutes, which offer 5 undergraduate programs, 13 master programs and 1 doctoral program. In July 2010 NTCN was renamed to National Taipei University of Nursing and Health Sciences (NTUNHS).

The Department of Health Care Management, established in 1994 aims to promote practice and research in the field of health care management, and to provide students with training pertaining to the management of health care and health enterprise. Starting from 1999, the MSc. program majoring in health care management was launched in this department, and a 4-year undergraduate program was initialized in 2008. Students who graduate from this department are expected to serve as middle-level health care administrators.



International Health and Administration Undergraduate Program

I. Introduction of Program

The program is provided by the Department of Health Care Management at NTUNHS, aiming to provide comprehensive training courses concerning managerial professional development for licensed registered nurses who seek advanced knowledge on health and nursing administration. This program also set its focus on broadening students' horizons of medical knowledge and skill of hospital management, and on cultivating students' research capacity and leadership in health care and nursing program.

With qualified health and nursing administration specialists, we have accumulated abundant teaching experience and distinguished research accomplishment which can fulfill your every need of being a health and nursing administrative professional. The students will obtain the "Bachelor of Science (BS)" degree from the Department of Health Care Management after the four-year program (including a non-hands-on hospital practicum) is successfully completed.

Course Module

- Total Credits (128): minimum 72 professional compulsory credits, 30 general education program credits, and 26 elective credits.



➤ Compulsory Core Courses:

	1st year	2nd year	3rd year	4th year
General education curriculum (30credits / 40 hour)	Chinese 1 & 2 (6/8), (6/8)	Chinese 3 & 4 (6/8), (6/8)		
	Physical Education I & II (1/2), (1/2)	English for Healthcare and Nursing I (2/2)		
	Computer Literacy and Applications of Computer Networks (2/2)			
Courses required for specialty (72 credits / 84 hour):	Chemistry (2/2)	Microbiology and Immunology (3/3)	Business and management psychology (2/2)	Health economics (2/2)
	Chemistry Experiment (1/2)	Microbiology and Immunology Experimental (1/2)	Introduction health care delivery systems(2/2)	Teaching Principles (2/2)
	Human Anatomy (2/2)	Pharmacology (2/2)	Introduction to medicine I & II(3/3),(3/3)	Physical examination(3/3)
Professional foundation course	Laboratory of Human Anatomy(1/2)	Nutrition & Nutrition Experiment (2/2)	Medical-surgical nursing I&II (3/3), (3/3)	Practicum of health care management (4/8)
	Physiology (2/2)		Accounting (3/3)	Healthcare quality management (2/2)
	Biochemistry (2/2)	Calculus (3/3)	Epidemiology (2/2)	Healthcare of Financial Management (2/2)
Professional core courses	Biochemistry Experiment (1/2)	Basic Nursing (3/3)	Biostatistics (3/3)	Healthcare human resource management(2/2)
		Experiential learning in hospitals (1/2)	Elements of public health(2/2)	Healthcare informatics management (2/2)
			Experiential learning in health care organizations (1/2)	Healthcare marketing management(2/2)
				(Choosing 4 credits among 10 credits)
			Introduction to research method (3/3)	

➤ Optional Courses (26 credits / 26 hour) :

Management Science, Operation management in Healthcare Organization, Innovation management in Healthcare Organization, Healthcare organization Cost Management, Medical Performance Management, Health Information and Medical Record Management, Case Study of Hospital

Operation, Biotechnology and health, Statistical Software, Health Insurance, Aerobic dance, Yoga, Muscle Sculpting, Badminton, Tennis, Table Tennis, Swimming.

II . Qualification

Eligibility for application is limited to students,

- who have a high-school degree in nursing or an equivalent degree from foreign high schools accredited by the Ministry of Education, R.O.C. (Taiwan).
- who do not have the oversea Chinese status and do not hold a Republic of China passport for at least the past eight years,
- who have the evidence of English proficiency that is equivalent to the TOEFL computer-based test score of 173 (or paper-and-pencil test score of 500) or higher. The applicants those who are recommended by the R.O.C. (Taiwan) Embassy or Representative Office would receive a preferential consideration and may be waived from the formal English test, if they have been examined to have English proficiency by the R.O.C.(Taiwan) Embassy or Representative Office.

※A Tip for TOEFL Test:

All applicants who have not received a high school certificate from an educational institution in the United States or from one of the exempt countries (Canada, the U.K., the Republic of Ireland, New Zealand, or Australia) are required to submit official IELTS or TOEFL scores in order to be considered for admission . The test is administered by Educational Testing Service. Information regarding the TOEFL is available at www.toefl.org.

Program Duration

It is a policy of the TaiwanICDF scholarship that the duration for this undergraduate's program is limited to **four years**. International students shall successfully pass all courses within four years and receive the Bachelor of Science degree conferred by the National Taipei University of Nursing and Health Sciences in accordance with the laws of the R.O.C. Ministry of Education. If a student fails to finish the requirements for the bachelor's degree within the stipulated time period, the scholarship provided by the TaiwanICDF shall not be extended. Those who have completed all the required courses may continue to apply for the TaiwanICDF international graduate program in related-fields.

III . Admission

1. The following items must be submitted with the application when applying to the National Taipei University of Nursing and Health Sciences.
 - Application form

- **One photocopy of diploma** of the highest degree attained (with official translation to Chinese or English if in other languages) and **official transcript** of the degree program in English. The diploma shall be subject to validation by the R.O.C. (Taiwan) Embassy or Representative office in accordance with requirements of the R.O.C. Ministry of Education.
 - Certificate of health status within 3 months (*please refer to TaiwanICDF medical report*), **which must include test for HIV** as required by the Department of Health, Executive Yuan, R.O.C.
 - One letter of recommendation
 - One curriculum vitae
 - One statement of purpose / study plan in English
A 500-1000 word statement concerning your past work, preparation for the intended field of study, relevant background and interests, academic plans, and career objectives is required. It should be used to describe your reasons for applying to NTUNHS or the program. This statement may assist the admissions committee in evaluating your aptitude and motivation for undergraduate study.
 - Evidence of English proficiency—all applicants must pass oral exam conducted in English at the R.O.C. (Taiwan) Embassy or Representative Office stationed in the respective country, or submit tests of English within the last two years. The students examined by the Embassy to have English proficiency equivalent to TOEFL computer-based test score of 173 (or paper-and-pencil test score of 500) or higher can be waived the formal TOEFL test.
 - Other supporting documents such as publications, awards, or academic honors. (optional)
2. Application forms and relevant materials must be forwarded by the R.O.C. (Taiwan) Embassy or Representative Office to the following address:

Office of International Academic Exchange Division

National Taipei University of Nursing and Health Sciences

No.365, Ming Te Road, Peitou District, Taipei City 112, Taiwan (R.O.C.)

Tel: 886-2-28227101 ext. 2731 Fax: 886-2-28206729

E-mail: michelle@ntunhs.edu.tw

3. No application with missing articles or incomplete forms will be accepted by the National Taipei University of Nursing and Health Sciences. No late submission or any make-up practice will be accepted.

Notification of Admission and Registration

1. As soon as we receive your application materials, we will inform you via e-mail with your application status.
2. After being reviewed and approved by the International Health and Nursing Administration Program, applications will be submitted to the Committee of

International Student Admission at the National Taipei University of Nursing and Health Sciences for final approval.

3. After being notified of admission, students must complete registration procedures within the specified time. Late registration will not be accepted.
4. If any information provided by the student was found falsified, student shall be denied of admission.
5. Students must provide original diploma at registration and official English translation is required if the original document is in other languages.

Scope of Scholarship

Entitlements:

The scholarship, including airfare (a round trip ticket), housing, tuition, credit fees, insurance, book costs and a monthly allowance, will be provided to each student. The scholarship is itemized as follows:

- Airfare—the TaiwanICDF shall provide one economy class ticket of the most direct flights to and from Taiwan.
- Housing—the scholarship shall cover the rents of the undergraduate students' dormitory at National Taipei University of Nursing and Health Sciences.
- Tuition fees—the scholarship shall cover registration and tuition fees at the National Taipei University of Nursing and Health Sciences.
- Credit fees—the scholarship shall cover the fees for the credits required for obtaining the B.S. degree at the National Taipei University of Nursing and Health Sciences.
- Insurance—in addition to the mandatory insurance, students shall be insured for accidental and medical coverage while they are in Taiwan. The insurance fees will be paid by the scholarship.
- Book costs—assigned textbooks shall be provided upon the approval of the Department of Health Care Management.
- Allowance—each Scholarship Program student shall receive NT\$12,000 per month (NT\$144,000 per annum) as allowance for food and miscellaneous living expenses. The sum will be deposited monthly into students' local bank account.

Notices

1. Undergraduate Health and Nursing Administration Program students must complete a minimum 72 professional compulsory credits, 30 general education program credits, and 26 elective credits.
2. Waiving of the required courses may be granted upon the review and the approval of the Education Committee of the International Health and Nursing Administration Program if the student had successfully completed the same course in recent five years. Waiving of the required courses may be approved by the Education Committee if the program instructor acknowledges that the working experience of the student is related to the

content of the courses.

IV. Application Deadline

Application Deadline: April 30, 2012

V. Contact Information

Contact Person: Michelle Lo
Tel: 886-2-28227101 ext. 2730 or 2731
Fax: 886-2-28206729
E-mail: michelle@ntunhs.edu.tw

Contact Address

Office of International Academic Exchange Division
National Taipei University of Nursing and Health Sciences
No.365, Mingde Rd., Peitou District, Taipei City 112, Taiwan (R.O.C.)

Program webpage

<http://cham.ntunhs.edu.tw/files/13-1012-2336.php>

Please check our website for latest update of the application forms

*Thank for your interest in our program!
We look forward to receiving your application form.*

International Master of Science Program

I. Introduction of Program

The program is provided by the college of nursing, which is the biggest as well as most sophisticated college in NTUNHS. By having educated countless nursing specialists, we have accumulated abundant teaching experience and distinguished research accomplishment which can fulfill your every need of being a nursing professional.

The program aims to provide a path towards professional development for licensed registered nurses by concentrating on broadening students' horizons of knowledge of international health and human illnesses as well as cultivating research capacity and leadership in nursing care. The students will earn the "Master of Science (major in nursing)" degree from the Graduate Institute of College of Nursing after the two-year scholarship program is successfully completed.

Courses

- Total Credits(30): minimum 24 credits plus 6 thesis credits
- Required core courses:

Course Title	Credits
Research Methodology	3
Nursing Theory	2
Advanced Bio-statistics	3
Advanced Health Assessment	3
Transcultural Health Nursing I	3
Transcultural Health Nursing II	3
Transcultural Nursing Field Experience	3

- Elective courses:

Course Title	Credits
Elective Courses	3
Independent Study I	1

II. Qualification

Eligibility for application is limited to students,

- who do not have the overseas Chinese status and do not hold a Republic of China passport for at least the past eight years.
- who have a bachelor's degree or associate's degree in fields related to nursing at national or registered private universities and independent colleges, or foreign universities and colleges approved by the R.O.C. Ministry of Education.
- who have the evidence of English proficiency that is equivalent to the TOEFL computer-based test score of 173 (or paper-and-pencil test score of 500) or higher. The applicants those who are recommended by the R.O.C. (Taiwan) Embassy/Representative Office or Taiwan Technical Mission would receive a preferential consideration and may be waived from the formal English test, if they have been examined to have English proficiency by the R.O.C.(Taiwan) Embassy/Representative Office or **Taiwan Technical Mission**.

※A Tip for TOEFL Test:

All applicants who have not received a bachelor's degree (or higher) from an educational institution in the United States or from one of the exempt countries (Canada, the U.K., the Republic of Ireland, New Zealand, or Australia) are required to submit official IELTS or TOEFL scores in order to be considered for admission . The test is administered by Educational Testing Service. Information regarding the TOEFL is available at

Program Duration

It is a policy of the TaiwanICDF scholarship that the duration for this master's program is limited to **two years**. International students shall successfully pass all courses and complete a master thesis within two years and receive the Master of Science degree conferred by the National Taipei University of Nursing and Health Sciences in accordance with the laws of the R.O.C. Ministry of Education. If a student fails to finish the requirements for the master's degree within the stipulated time period, the scholarship provided by the Taiwan ICDF shall not be extended. Those who have completed all the required courses may continue to complete the thesis with other funding sources upon the approval of one's national government, the ROC Ministry of Foreign Affairs, and TaiwanICDF.

III. Admission

1. The following items must be submitted with the application when applying to the National Taipei University of Nursing and Health Sciences.
 - Application form
 - **One photocopy of diploma** of the highest degree attained (with official translation to Chinese or English if in other languages). The diploma shall be subject to validation by the R.O.C. (Taiwan) Embassy or Representative Office in accordance with requirements of the R.O.C. Ministry of Education.
 - **Official transcript** of the degree program in Chinese or English. The transcript shall be subject to validation by the R.O.C. (Taiwan) Embassy or Representative Office in accordance with requirements of the R.O.C. Ministry of Education.
 - Certificate of health status within 3 months (*please refer to TaiwanICDF medical report*), **which must include test for HIV** as required by the Department of Health, Executive Yuan, R.O.C.
 - One letter of recommendation in English
 - One statement of purpose / study plan in English
A 500-1000 word statement concerning your past work, preparation for the intended field of study, relevant background and interests, academic plans, and career objectives is required. It should be used to describe your reasons for applying to NTUNHS or program. This statement may assist the admissions committee in evaluating your aptitude and motivation for graduate study.
 - Evidence of English proficiency—all applicants must pass oral exam conducted in English at the R.O.C. (Taiwan) Embassy/Representative Offices or Taiwan Technical Mission stationed in the respective country, or submit tests of English within the last two years. The students examined by the Embassy to have English proficiency equivalent to TOEFL computer-based test score of 173 (or paper-and-pencil test score of 500) or higher can be waived the formal TOEFL test.
 - Other supporting documents such as publications, awards, or academic honors. (optional)
2. Application forms and relevant materials must be forwarded by the R.O.C. (Taiwan) Embassy/Representative Offices or Taiwan Technical Mission to the following address:

Office of International Nursing Program
College of Nursing
National Taipei University of Nursing and Health Sciences
No.365, Ming Te Road, Peitou 112, Taipei, Taiwan (R.O.C.)
Tel: 886-2-28227101 Extension 3306 or 2731 Fax: 886-2-28206729
E-mail: yiukang@ntunhs.edu.tw

3. No application with missing articles or incomplete forms will be accepted by the National Taipei University of Nursing and Health Sciences. No late submission or any make-up practice will be accepted.

Notification of Admission and Registration

1. As soon as we receive your application materials, we will inform you via e-mail with your application status.
2. After being reviewed and approved by the International Nursing Program, applications will be submitted to the Committee of International Student Admission at the National Taipei University of Nursing and Health Sciences for final approval.
3. After being notified of admission, students must complete registration procedures within the specified time. Late registration will not be accepted.
4. If any information provided by the student was found falsified, student shall be denied of admission.
5. Students must provide original diploma and transcript at registration and official English translation is required if the original document is in other languages.

Scope of Scholarship

1. Entitlements:

The scholarship, including airfare (**a round trip ticket**), housing, tuition, credit fees, insurance, book costs and a monthly allowance, will be provided to each student. The scholarship is itemized as follows:

- Airfare—the TaiwanICDF shall provide one economy class ticket of the most direct flights **to and from** Taiwan.
- Housing—the scholarship shall cover the rents of the graduate students' dormitory at the National Taipei University of Nursing and Health Sciences.
- Tuition fees—the scholarship shall cover registration and tuition fees at the National Taipei University of Nursing and Health Sciences.
- Credit fees—the scholarship shall cover the fees for the credits required for obtaining the M.S. degree at the National Taipei University of Nursing and Health Sciences.
- Insurance—in addition to the mandatory insurance, students shall be insured for accidental and medical coverage while they are in Taiwan. The insurance fees will be paid by the scholarship.
- Book costs—assigned textbooks shall be provided upon the approval of the Graduate Institute of Nursing.
- Allowance—each M.S. Program students shall receive NT\$15,000 per month (NT\$180,000 per annum) as allowance for food and miscellaneous living expenses. The sum will be deposited monthly into students' local bank account.

Notices

1. Nursing Program students must complete a minimum of 24 credits in courses and 6 credits either in a master thesis or a clinical project.
2. Nursing Program students must take 26 compulsory credits (including Research Methodology, Nursing Theory, Advanced Bio-statistics, Advanced Health Assessment, Transcultural Health Nursing I, Transcultural Health Nursing II, Transcultural Nursing Field Experience, Master Thesis/ Project) and 4 credits of elective courses.
3. Waiving of the required courses may be granted upon the review and the approval of the Education Committee of the International Nursing Program if the student had successfully completed the same course in recent five years. Waiving of the required courses may be approved by the Education Committee if the program instructor acknowledges that the working experience of the student is related to the content of the courses.

IV. Application Deadline

Application Deadline: April 30, 2012

V. Contact Information

Contact Person: Yu-Chia Lo
Tel: +886-2-28227101 ext.3306 or 2731
Fax: +886-2-28206729
E-mail: yiukang@ntunhs.edu.tw

Contact Address:

Office of International Nursing Program
College of Nursing
National Taipei University of Nursing and Health Sciences
No.365, Mingde Rd., Peitou District, Taipei City 112, Taiwan (R.O.C.)

Program webpage:
<http://140.131.87.87/nursing-new/eng/>

Please check our website for latest update of the application forms

*Thank for your interest in our program!
We look forward to receiving your application form.*

number, street, and apartment

city

state or province

postal or zip code

country

Current telephone number: _____
country code/area code/ number

E-mail address: _____

Occupation: _____ Relation to the applicant: _____

ACADEMIC INFORMATION

Proposed degree: Master Undergraduate

- Proposed field of study:
- International Nursing of Science
 - International Health and Nursing Administration
 - Nursing
 - Nurse Midwifery
 - Chinese Medicine with Western Nursing
 - Health Allied Education
 - Health Care Management
 - Information Management
 - Tourism and Health Science
 - Long-Term Care
 - Infant and Child Care
 - Exercise and Health Science
 - Speech and Hearing Disorder and Sciences
 - Life and Death Education and Counseling

Major subject or concentration: _____

Proposed term and year of admission: Fall _____
Year

List all colleges or universities / high schools you have attended or now are attending:

1. _____
institution

city state country

_____ / _____
entering date (mm/yy) leaving date (mm/yy) major subject degree date

2. _____

institution				
_____	_____	_____	_____	
city	state	country		
_____	_____	_____	_____	_____ / _____
entering date (mm/yy)	leaving date (mm/yy)	major subject	degree	date

3. _____

institution				
_____	_____	_____	_____	
city	state	country		
_____	_____	_____	_____	_____ / _____
entering date (mm/yy)	leaving date (mm/yy)	major subject	degree	date

Academic and other employment related to your proposed field of study:

_____	_____	_____ / _____ / _____
position	employer or institution	dates

nature of work		

_____	_____	_____ / _____ / _____
position	employer or institution	dates

nature of work		

_____	_____	_____ / _____ / _____
position	employer or institution	dates

nature of work		

Academic honors, fellowships, scholarships or other awards you have received:
(please list the names, dates, and grantors)

Publications and original work

(please give titles or other publications and of any research, inventions, or other creative work that you have done.)

GRADE POINT AVERAGE

※ Please enter your grade point average (GPA) information. Please figure your average by using either the A-F system or the numerical system (0-100, 0-20 scale, etc.) To compute the GPA on the A-F system, take the total number of credit hours of As and multiply by 4; the number of credit hours of Bs by 3; Cs by 2; Ds by 1; Fs by 0. Add these results to get the total number of Grade points. Now add all of the credit hours of As, Bs, Cs, Ds and Fs. Divide the total number of Grade points by the total number of credit hours. If your school uses a system of plus or minus Grades and assigns a value to the plus or minus Grades, for example A=4, B+=3.33, then you should use that system in computing the GPA. Courses Graded on the Pass/No Pass, or S/U scale should not be figured into the GPA.

A-F GPA (Overall Undergraduate): _____
* **

A-F GPA (Overall graduate, if applicable): _____
* **

Numerical GPA (Overall Undergraduate): _____
(e.g., 1-5, 1-10, 1-20, 1-100)

Numerical GPA (Overall graduate if applicable): _____
(e.g., 1-5, 1-10, 1-20, 1-100)

LANGUAGE PROFICIENCY

Language	Reading	Listening	Speaking	Writing
Chinese	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> E G F L	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> E G F L	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> E G F L	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> E G F L
English	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> E G F L	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> E G F L	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> E G F L	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> E G F L
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Others	R	L	S	W
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※ E: excellent, G: good, F: fair, L: limited

TEST SCORES

TOEFL (if applicable)

TOEFL tests must have been taken within the last two years. If your test date is older than two years, please schedule to take the TOEFL again.

Native Language: _____

Test ID: _____

IBT: *(Taken after Sept. 1, 2007)*

CBT or PAPER TEST:

Test date: _____

Test date: _____

Listening: _____

Section1: _____

Reading: _____

Section2: _____

Speaking: _____

Section3: _____

Writing: _____

Total: _____

Total: _____

ESTIMATED EXPENSES

Finances must be secured for a minimum of the years of the program you apply for. Yearly totals must meet or exceed the minimum estimated annual expenses shown below. Please keep in mind that the estimates for living expenses are approximations and that, depending on your lifestyle, these cost may be higher. Transportation to and from Taiwan is not included in these estimates

2012-2013 Estimated Annual Expenses

\$(Us dollars)

<i>Breakdown of Costs</i>	<i>Annual</i>
Tuition and fees	\$2136
Room and Board	\$1453
Book and Supplies	\$606
Living Expenses	\$2909
Health Insurance	\$219
Total	\$7323

STATEMENT OF UNDERSTANDING

I certify that the information on this application is complete and accurate. I understand the following:

1. that this form is only for applicants who do not have overseas Chinese status and do not hold a Republic of China passport, except for applicants who hold Hong Kong or Macau citizen status. Foreign applicant who held R.O.C. citizenship within the past eight years is not eligible for application. The provision specified in the preceding paragraph "eight years" is from the loss of R.O.C. nationality to the first term beginning on the calendar of NTUNHS.
2. that misrepresentation of application information is sufficient grounds for denial of admission and for cancellation of admission or registration;
3. that submission of fraudulent credentials may also be a criminal offense;
4. that due to a perceived increase in forged transcripts the admissions office will write to the schools of selected students and verify their credentials;
5. that if a student's transcripts are forgeries, the NTUNHS will drop the student from The Graduate / Undergraduate School and may refer the matter to law enforcement authorities for prosecution;
6. that official notification of admission or rejection is sent only by Office of International Program;
7. that foreign students who have already completed in Taiwan the applied degree program or have been expelled from university are not eligible to re-apply for admission. Breaking this rule would result in immediate cancellation of the applicant's admission or the deprivation of the applicant's recognized status as NTUNHS registered students.

Signature (Full Name) _____

Date of application _____ (Day/ Month/ Year)

The applicant should complete all relevant sections below and submit this form to the person providing a recommendation. Materials submitted in support of application become the property of the University, and neither originals nor copies will be provided.
(please type or print)

TO BE COMPLETED
BY THE APPLICANT

--	--	--

LAST/FAMILY NAME

FIRST/GIVEN NAME

MIDDLE/OTHER

--	--

DATE OF BIRTH (MM/DD/YYYY)

E-MAIL

--	--

PROPOSED PROGRAM

SEMESTER/TERM AND YEAR
FOR WHICH YOU ARE APPLYING

TO BE COMPLETED
BY THE COMMENDER

You have been requested to provide a recommendation on behalf of the above named applicant to a graduate program at National Taipei University of Nursing and Health Sciences. Please assist us in evaluating this applicant's potential academic success and general suitability of the proposed graduate program of study.

The Office of International Nursing Program will greatly appreciate your cooperation in providing an evaluation of the applicant's potential as a graduate student.

IMPORTANT - Please seal the completed form and your letter in an envelope with your signature across the seal portion. You may return the sealed envelope to the applicant or sent it directly to Office of International Nursing Program, National Taipei University of Nursing and Health Sciences, No.365, Ming Te Road, Peitou 112, Taipei, Taiwan (R.O.C.).

--	--	--

NAME OF RECOMMENDER

POSITION

INSTITUTION

--	--

E-mail

Phone

--	--

HOW LONG HAVE YOU KNOWN THE APPLICANT?

IN WHAT CAPACITY?

1. What makes this candidate especially promising for this specific program when compared to other applicants who may appear equally well-qualified? If for any reason you have substantial reservations about the candidate's potential for success. Please explain. (Attach a separate sheet if necessary.)

2. Please summarize your evaluation by checking your estimate on the following items.

Lowest	Next Higher	Next Higher	Highest	Truly	Unable to Judge
50%	25%	20%	5%	Exceptional	

Contact Information

Applying for International Health and Nursing Administration Undergraduate Program

Contact Person: Michelle Lo

Tel: 886-2-28227101 ext. 2730 or 2731

Fax: 886-2-28206729

E-mail: michelle@ntunhs.edu.tw

Contact Address

Office of International Academic Exchange Division
National Taipei University of Nursing and Health Sciences
No.365, Mingde Rd., Peitou District, Taipei City 112, Taiwan (R.O.C.)

Applying for International Nursing Master of Science Program

Contact Person: Yu-Chia Lo

Tel: 886-2-28227101 ext.3306 or 2731

Fax: 886-2-28206729

E-mail:yiukang@ntunhs.edu.tw

Contact Address

Office of International Nursing Program
College of Nursing
National Taipei College of Nursing
No.365, Mingde Rd., Beitou District, Taipei City 112, Taiwan (R.O.C.)

Check List

Please fill out the forms below according to the instruction.

Full Name in English: _____ **Phone Number:** _____

Fax Number: _____ **Institute:** _____

E-mail: _____

Graduated ? Yes No **If no, Date of (Expected) Graduation** _____M_____Y

*

A complete application must include the followings; all documents must be arranged in the order according to this 'checklist', and do not put documents in a binder or folder. Please read instruction first before preparing the documents.

Tick	Items of Documents	Copies
	a、 Application Form	
	b、 Certified Photocopy of the Original Diploma in English	
	c、 Certified Original Transcripts in English Issued and Stamped by the School	
	d、 TaiwanICDF Medical Report (one original)	
	e、 Letter of Recommendation in English	
	f、 Statement of Purpose / Study Plan in English	
	g、 Evidence of English Proficiency	
	h、 Curriculum Vitae and Other Supporting Materials	
	i. Photocopy of Passport and Other Supporting Documents (optional)	

Please TYPE your mailing address in the blank space below so that we can mail the admission result to you.

International Cooperation and Development Fund



MEDICAL REPORT FOR

International Higher Education Scholarship Programs 2011

PART 1: HEALTH DECLARATION
PART 2: MEDICAL EXAMINATION FORM

Applying for: National Taipei University of Nursing and Health Sciences (NTUNHS)

- International Health and Nursing Administration Undergraduate Program
 International Nursing Master of Sciences Program

INSTRUCTION :

PART 1: Personal Details and Health Declaration — to be completed by the applicant

I hereby certify that the following information is true and complete, and agree that any misrepresentation or deliberate omission of a material fact on this form may result in the withdrawal of an offer of a place or scholarship, or may result in the termination of any such offer at a future date. I hereby grant the Taiwan ICDF permission to share information contained in my Medical Examination Form with relevant authorities.

X

Signature

Date

PART 2: Medical Examination — to be completed by certified physician

☆National Taipei University of Nursing and Health Sciences (NTUNHS) reserves the right to require the applicant to undergo a future medical examination after he/she arrives in the Republic of China (Taiwan).

PART 1: HEALTH DECLARATION

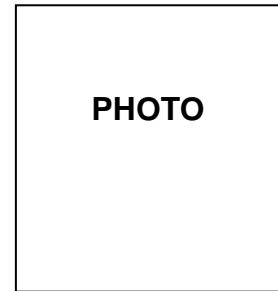
Nationality: _____

Name: (Last) _____

(First) _____

(M. Initial) _____

Gender: Male Female **Date of Birth:** _____ Y/ _____ M/ _____ D/



Health History:

Have you ever suffered any of the following conditions? Please mark X in appropriate box

	Yes	No		Yes	No
Psychiatric illness	<input type="checkbox"/>	<input type="checkbox"/>	Thyroid Diseases	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	Kidney Diseases	<input type="checkbox"/>	<input type="checkbox"/>
Migraine	<input type="checkbox"/>	<input type="checkbox"/>	Cancer	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>	<input type="checkbox"/>
Tuberculosis (PTB)	<input type="checkbox"/>	<input type="checkbox"/>	Venereal Diseases	<input type="checkbox"/>	<input type="checkbox"/>
Hypertension (HPT)	<input type="checkbox"/>	<input type="checkbox"/>	Leukemia	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes Mellitus (DM)	<input type="checkbox"/>	<input type="checkbox"/>	Hemophilia	<input type="checkbox"/>	<input type="checkbox"/>
Heart Diseases	<input type="checkbox"/>	<input type="checkbox"/>	Hepatitis	<input type="checkbox"/>	<input type="checkbox"/>
Malaria	<input type="checkbox"/>	<input type="checkbox"/>	Measles	<input type="checkbox"/>	<input type="checkbox"/>
			German Measles (rubella)	<input type="checkbox"/>	<input type="checkbox"/>

Please State (if any)

Other illnesses

.....

Operation / Surgical

.....

Allergic to

.....

Family Medical History (if any)

Father:..... Mother:

Past Year Life: Please select

1. Sleep: 7~8 hours every day Under 7~ 8 hours Often suffer from insomnia
2. If that is basic to exercise each time for 30 minutes and 3 times every week at least, did you achieve?
No Yes
4. Do you often feel anxious and worried? Few or not Sometimes Often
5. Do you often feel the chest is stuffy? No Sometimes Yes
6. Stomach-ache? No Sometimes Often;. Headache? No Sometimes Often
7. The menarche (girl only): (1) The age of the menarche: _____years-old
(2) Is menstrual cycle regular? No Yes(Date of partition _____day)
(3) Do you ever have menstrual cramp phenomenon No Yes

PART 2: MEDICAL EXAMINATION

Physician must complete all questions and give additional comment where necessary. Kindly note that physician is responsible for the information, suggestions and recommendation regarding the applicant's health given in this form.

Certified original lab data need to be attached as reference.

Name of Applicant: _____

Date of Birth

Y/ M/ D/

Physical Examination:

HEIGHT : _____ cm

WEIGHT : _____ kg

BLOOD PRESSURE : _____ / _____ mmHg

PULSE RATE : _____ /min

VISUAL ACUITY : R _____ L _____

EYES : normal color anomalous other_____

EAR/NOSE/THROAT : normal auditory meatus abnormal cleft lip and palate
impending infarction allergic rhinitis chronic rhinitis other_____

NECK : normal wryneck goiter the lymphoid swelling of gland is big other_____

CHEST : normal thoracic anomaly core noise arrhythmias other_____

CHEST X RAY : normal advertise for like the tuberculosis pleura effusion thoracic abnormality
tuberculosis calcify the spinal column side is curved up cardiac hypertrophy
bronchiectasis other_____

ABDOMEN : normal hepatomegaly splenomegaly hernia other_____

SPINAL COLUMN ARMS AND LEGS : normal scoliosis frog limb articulation deformity
edema other_____

SKIN : normal wart purple plague scabies a dermatitis other_____

MOUTH CAVITY : normal oral hygiene is poor calculus gingivitis milk tooth other_____

Urine Test:

NAD WBC RBC PROTEIN CLUCOSE

Hepatitis B Test:

POSITIVE NEGATIVE

Serological Test for Syphilis:

POSITIVE NEGATIVE

HIV Test:

POSITIVE NEGATIVE

THE ORIENTATION INSTITUTION WILL REQUIRE A FURTHER HIV TEST AFTER HE/SHE ARRIVES IN ROC (TAIWAN). THE ONE WITH POSITIVE TEST RESULT WILL BE REJECTED AND SENT BACK HOME IMMEDIATELY.

Pregnancy Test:

POSITIVE NEGATIVE

Is the applicant now under treatment for any physical or emotional condition?

.....

Do you have any recommendations for the health care of this applicant?

.....

By history and physical examination, is this applicant a carrier of any communicable disease?

.....

CERTIFICATION BY THE MEDICAL OFFICER:

I certify that I have examined the above applicant and in my opinion:

- The applicant is medically fit to undertake a program in Taiwan
- The applicant suffers mental or physical defects and is NOT in good health

Name of physician, Title :.....

Name of Hospital / Clinic :.....

Address :.....

.....

.....

Not valid if without the hospital or clinic's seal