**Kaohsiung Medical University (KMU)**

**Department of Medicinal and Applied Chemistry**

**English Proficiency Requirement Form for MS and PhD Admission**

International applicants (regardless of your citizenship) must fill up this form to prove proficiency in English.

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| **Personal Information** | Attach recentphotograph here(about 1〞x 2〞) |
| Full Name |  |
| Gender | □ Male □ Female |
| Date of Birth | (Month) ／(Day) ／(Year) |
| Country/Citizenship |  |
| Passport No. |  |
| E-mail  |  |
| Mobile Number: |  |
| Skype ID/No. |  |
| **Applicant’s Language Proficiency** |
| **Applicant’s Native/first language :** □ English □ Others (Specify: ) |
| **Applicants’ Official language:** □ English □ Others (Specify: ) |
| **Applicants’ Second language:** □ English □ Chinese □ Others (Specify: ) |
| **Applicants’ Medium of Study in Senior High School:** □ English □ Others (Specify: ) |
| **Applicants’ Medium of Study in Bachelors’ Degree:** □ English □ Others (Specify: ) |
| **Applicants’ Medium of Study in Masters’ Degree:** □ English □ Others (Specify: ) |
|  **Note:** Non-native English speaker applicants must need to submit the proof of medium of study in senior high school/bachelors and masters’ degree along with this application.  |
| **Applicant holds any official English Proficiency test score:** □ Yes (If yes – fill up the 1 A table) □ No (If no – full up the 1 B table, as below) |

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| **Table 1A. Applicant’s official English Proficiency test score table:** |
| **Proficiency test** | **Reading** | **Listening** | **Speaking** | **Writing** | **Total** |
| **TOEFL** |  |  |  |  |  |
| **IELTS** |  |  |  |  |  |
| **TOEIC** |  |  |  |  |  |
| **CAE** |  |  |  |  |  |
| **CPE** |  |  |  |  |  |
| **Others (Specify: )** |  |  |  |  |  |
|  **Note:** Attach the proof of official English Proficiency test score along with this application. Official scores must be taken no more than two years prior to submission of the application. |

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| **Table 1B. Applicant rate himself/herself about of their English Proficiency in the below table:** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Proficiency** | **Reading** | **Listening** | **Speaking** | **Writing** |
| Excellent |  |  |  |  |
| Good |  |  |  |  |
| Average |  |  |  |  |
| Poor |  |  |  |  |

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| **Declaration** |
|  I authorize this University to verify all of the above information provided. After being admitted into this department, KMU provided if any of the information provided are found and proved to be false, I have no objections in accepting the consequence of having my studentship status revoked.**Applicant’s Signature: Date: (month) (day) (year)** |