Taipei Medical University Course Transfer/Waiver Application for Joint Dual Degree Programs

										Date of Applicat	ion:	(mm/dd/yyyy)
Name				Department								
(Signature)				Student ID					Phone			
Original School and Department												
TMU Course			Course Completed in Original School						Department Review			
Course Title	Required /Elective	Credit	Course Title		Required /Elective	Credit	Grade	Administration Professor		or	Director	
								☐ Agree ☐ make-up cour	Disagree Exempted	<u> </u>		
									Agree make-up cour	Disagree Exempted ese:	,	
									Agree make-up cour	Disagree Exempted ese:	,	
									Agree make-up cour	Disagree Exempted ese:	,	
									Agree make-up cour	Disagree Exempted ese:	,	
									☐ Agree ☐ Disagree☐ Exempted, make-up course:			
									Agree make-up cour	Disagree Exempted rse:	,	
									Agree make-up cour	Disagree Exempted rse:	,	
Note								Registration Section				
								Regist	ration Officer	Registrati	on Chief	
 Only for Joint Dual Degree Programs students during the newly admitted semester in TMU. Students are required to submit their applications during the "credit transfer and waiver" period according to the period of Registration Guide, within the semester they are newly admitted to TMU. The application, along with the original hardcopy of transcripts from the original school for all semesters, must be submitted to the Registration Section at Xinyi Campus before the specified deadline. Courses that have been approved for credit transfer/waiver, courses taken at the current semester, and withdrawal courses are not eligible for application. 												