Authorization Letter

I,	, can't address	in person,
hereby authorized		, to apply/transact on my behalf, and
confirm with full legal	responsibility for any	perjuries found.
The above statement is	addressed to Registra	tion Section, Taipei Medical University.
Signature of authorizer	:	
Name:	_ (Personal signature	e)
Student ID:		
Alien. Resident Certific	cate ID No.:	
Contact Telephone No.	:	
Signature of proxy		
(The proxy who be authorized to	transact for graduation/ withd	lrawal procedure has to bring own identification and the student
ID card of authorizer.)	/ 5	Y
Name:	_	e)
Student ID:		
Alien. Resident Certific	cate ID No.:	
Contact Telephone No.	:	
Date: D D / M	M / Y Y Y	-