



導師履歷

TRAINER CURRICULUM VITAE

I. 個人資料 PERSONAL INFORMATION			
中文姓名 Name in Chinese:		性別 Sex:	<input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female
英文姓名 Name in English:			
出生日期 Date of Birth:		出生地點 Place of Birth:	
國籍 Nationality:		證件號碼 ID/Passport No.:	
電郵 E-mail:		電話 Phone:	
地址 Address:			
教學語言 Teaching Languages:			
教學領域或任教科目 Teaching Areas or Subjects:	<p><i>例: 會計學, 基礎會計</i> <i>e.g.: Accounting, Principles of Accounting</i></p>		

II. 學歷 ACADEMIC QUALIFICATIONS

學歷資格及取得年份 Qualification and Year Awarded	院校 Institute	地點 Place	主修 Major
例: 碩士, 2020 e.g.: Master, 2020	例: 澳門大學 e.g.: University of Macau	例: 澳門 e.g.: Macao	例: 會計學 e.g.: Accounting

III. 全職工作經驗 (包括線上教學) FULL-TIME WORKING EXPERIENCE (INCLUDING ONLINE TEACHING)

工作時期 Working Duration	機構 Institute	地點 Place	職位 Position

IV. 兼職工作經驗 (包括線上教學) PART-TIME WORKING EXPERIENCE (INCLUDING ONLINE TEACHING)

工作時期 Working Duration	機構 Institute	地點 Place	職位 Position

V. 專業資格 PROFESSIONAL QUALIFICATIONS

取得年份 Year of Awarded	專業資格 Professional Qualifications	發出機構 Issuing Institute

VI. 相關獎項及該行業傑出表現 RELEVANT AWARDS AND PROOF OF OUTSTANDING PERFORMANCE WITHIN THE INDUSTRY

取得年份 Year of Awarded	獎項 / 傑出表現 Awards and Proof of Outstanding Performance	發出機構 Issuing Institute

VII. 其他資料 OTHER INFORMATION

*如有需要可以附件說明 Please use attachment if needed

VIII. 個人聲明 DECLARATION

請在適當處以“X”表示。Put “X” as appropriate

- 1/ 本人 從未 曾經 因刑事案件被執法機關定罪 (必須填寫)。
I hereby declare that I have have not been convicted of a criminal offence by law enforcement agencies (please indicate).
- 2/ 本人身體健康及心理狀況正常，沒有嚴重疾病或慢性疾病等。
I have normal physical and mental health and do not have serious, chronic diseases, etc.
 本人身體有_____問題，並正接受醫藥治療。
I have physical problem(s) about _____.
I' m now receiving medical treatment.
- 3/ 本人聲明此表格及附件所載之一切資料，均屬真確。如有虛假，澳門大學持續進修中心（以下簡稱“中心”）可隨時取消本人之申請及/或即時終止本人為中心所提供之服務，所有在表內收集的個人資料，中心將只用作行政及教學用途。而這些個人資料亦可在澳門大學內部及其他依法律規定或獲閣下授權的實體之間傳遞，以進行相關程序處理。
I declare that all information given in this form and the attached documents is true and correct to the best of my knowledge. I understand that the Centre for Continuing Education, University of Macau (below named as “CCE”) reserves the rights to disqualify my application and/or to terminate my service immediately and request compensation from me for the loss and impact if any information provided here is proved to be false and ingenuine. The personal data collected in the form will only be used for administrative and teaching purpose and may also be transferred within the University and to entities that are in accordance with legal provision or with your prior consent, for the purpose of carrying out the related procedures.
- 4/ 本人授權 貴中心向現職及/或以往之僱主索取有關本人之工作表現及/或品格記錄。
I hereby authorize the CCE to contact my existing and/or previous employer as listed in the form to obtain information with regard to my work performance and/or personality.
- 5/ 本人同意中心、合辦課程之相關機構/公司及傳媒因課程宣傳推廣、報導或通訊目的而使用本人的資料而無需另行徵得本人許可。當中包括身份資料 (姓名)、課程資料、肖像及有或無聲音之錄影片。
I consent CCE, and/or other institutes/organizations collaborated with CCE and media, to use my information for course promotion, record and/or communication purpose without further obtain my permission. The mentioned information includes identification information (name), course information, image and/or videos with or without sound recorded.
- 6/ 本人已知悉澳門特別行政區有關當局在入境、逗留方面以及身份證明文件方面的所有法律規定並承諾遵守，因此而產生的一切責任及後果均由本人承擔，與澳門大學持續進修中心無關。
I am aware of and committed to compliance with all the legal requirements of the relevant authorities of the Macao Special Administrative Region in respect to issues related to entry, stay and identification documents. All the responsibilities and consequences arising from issues mentioned above are borne by myself and have nothing to do with the Centre for Continuing Education of University of Macau.

簽署 Signature: _____ 日期 Date: _____

(需與身份證件上簽名一致 Please sign the same as your identification document.)