

DEPOSITION (Winter Program)

**Please print out the DEPOSITION, signed it and E-mail back in PDF document.*

☐ *I certify that I have completed this application form by myself and that all the information I have given is true and accurate to the best of my knowledge. I further understand that misrepresentation or fraudulent information is sufficient grounds for canceling my admission or registration.*

☐ *I agree to abide by the rules, policies and regulation of the China Medical University (CMU) and CMU will assume no responsibility for my conduct or lack of compliance with any Taiwan laws.*

☐ *I'm currently enrolled in _____ (University) as a student and my student ID card is valid.*

☐ *I further understand that,*

(1) I need to participate for the entire program and the check-in date will be January 12th and check-out date will be January 25th. The program will start from January 13th and finished on January 24th.

(2) I'm willing to pay ☐TWD\$3,000 or ☐TWD\$7,000 (please tick one) for my accommodation from 1/12~1/24. And I understand that I need to pay for my own airfare, visa fee, meals, transportation, tickets, overseas medical insurance and any personal spending...etc.

(3) I have to obtain Overseas Medical Insurance.

(4) Before finishing the program, I have to hand in a reflection of the program.

(5) CMU reserves the right to modify the schedule.

☐ *Any statements that are not mentioned here, will be conducted with related regulations.*

☐ *I understand and agree with all the mentioned statements above and I have no objection as to regulations set forth by the admission committee of CMU for foreign students. If I violate any of the statements, it will lead to the cancellation of my registration and participated qualification.*

Date _____ (yyyy /mm / dd)

Please print _____

Signature of Applicant _____