# Shanghai University of Traditional Chinese Medicine

#### Academic Year 2021

# Application Form of International Postgraduate Student Master Degree

Full Name				
Student Type				
Full-time	Part-time			
Applying Colle	ege			
Applying Majo	or			
Applying Orie	ntation			
Applying Men	tor			
Date of Application:	YYYY	MM	DD	
( )				
* Apply for Shanghai Government Scholarship (Fall Apply for Degree Stipend of the university (Full Apply for Degree Stipend of the Univ		•	Yes Yes	No No
*These scholarships can be applied simultaneou	ısly but will not be	obtained by	one	
applicant at the same time.				

1

Unless there are special requirements, each column and blank in this form needs to be filled in English or Chinese. Application forms of programs taught in Chinese need to be filled in Chinese, application forms of programs taught in other languages need to be filled in English.

2

Applicants need to fill this form on his or her own with blank or ink-color fountain pen. The content is expected to be detailed and precise and the handwriting must be clear. If there is not enough space for elaboration, an attached additional page is allowed.

3

Applicant may apply for only one major.

4

Both graduates of medicine and non-medicine program need to fill in the column "graduation thesis" on the fifth page truthfully. If you do not have a graduation thesis, please give a clear indication by writing "None".

5

Please stick one 25\*35mm identification photo on the application form.

6

Should there be any mistakes, omission that lead to detrimental outcomes, the applicant shall be responsible for the consequences.



# Shanghai University of Traditional Chinese Medicine Master Degree Postgraduate Program Applicants'

#### **Interview Intention Form**

Name	Phone Number			
Applying College	Applying Major			
Current Location				
Time Difference	Hours	Earlier	Later than Beijing Time	
Student Type	Full-time		Part-time	
		P	lease select the form of	
interview that are most convenient to	you:(Multiple cl	noices are	e acceptable)	
On-site Interview				
For Telephone Interview, please prov	vide your Area Co	ode	Phone Number	
Skype	Wechat			
For Cyber Interview, please prov	ride your Skype a	nd (or) W	echat Account	

Please tick in the below form and select two interview time-range that are most convenient for you. (all indicated in Beijing Time)

8:30	0-11:00	11:0	00-13:30	13:	30-15:30
8:30-9:00		11:00-11:30		13:30-14:00	
9:00-9:30		11:30-12:00		14:00-14:30	
9:30-10:00		12:00-12:30		14:30-15:00	
10:00-10:30		12:30-13:00		15:00-15:30	
10:30-11:00		13:00-13:30			

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Note: This interview application form only provides a reference. The specific form of interview, interview time of each applicant shall be clearly written on the "interview notice".

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## RECOMMENDATION FORM

1 To be completed by th	e applican	ıt.				
Name of Applicant i	: in Chinese			 in Engli	:sh :	
Institute	in Chinese			in Engli	ish :	
: Program applied			ne Master e Doctoral		Part-time Master Part-time Doctoral	
Registered Field: in C	: Chinese			in English	:	
Research Topic in C	hinese _			in English	:	
To be completed by th  1 Please rate the applicant tutored or other employ	nt s abilit	ties in fo	ollowing aspe	ects in compari	-	
	*		*	*	*	*
Intelligence	Exc	cellent	Good	Satisfactory	Average or below	Not determined
Knowledge and Expertise						
Chinese Language Proficies	ncy					
Creativity	-					
Perseverance						
Ability of Discernn	nent					
*	•	5%	ó	•	6	%-20%
		219	%-50%			50%

\*Excellent indicates that the quality of the applicant being evaluated rank top 5% in comparison with other students or colleagues; Good indicates a rank of 6%-20%; Satisfactory indicates a rank of 21%-50%; Average or below indicates the a rank under 50%; Not determined indicates no sound information for judgment or not satisfactory.

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2

2 Please identify: how well you know the applicant; give general comments on the applicant's learning and research capability, professionalism, etc; what you think is the most impressive characteristics of the applicant. Please attach a separate sheet if necessary.

3 Please indicate the strength of your recommendation by a ticking in the appropriate box.

r lease mulcate the strength of your recommendation by a ticking in the appropriate box.						
( )	(	)	( )	( )		
I highly recommend the applicant.	I recommend to	the applicant.	I reserve my views.	I do not recommend.		
		_				
Referee's Name		Signa	iture			
in Block Letters						
		_	-			
Position		. Da	te			
Referee's Contact telephone nu	mber					
Referee's Email		_				
Name of Educational Institute						
Address of Institute				<del></del>		
Telephone No.						

В

## RECOMMENDATION FORM

1 To be completed by the ap	plicant.				
Name of Applicant in Cl	: ninese		in Engli	:sh :	
Institute in C	hinese		in Engli	ish :	
: Program applied		ne Master ne Doctoral		Part-time Master Part-time Doctoral	
Registered Field: in Chine			_	:	
Research Topic in Chine	ese		in English	:	
To be completed by the Ro 1 Please rate the applicant stutored or other employees	s abilities in fo	ollowing aspo	ects in compari	-	
	*	*	*	*	*
	Excellent	Good	Satisfactory	Average or below	Not determined
Intelligence					
Knowledge and Expertise					
Chinese Language Proficiency					
Creativity					
Perseverance					
Ability of Discernment					
*	59	6	•	6	%-20%
	219	%-50%			50%

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В

2

Telephone No.

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	your recommendation by		- I
( )	( )	( )	( )
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			<del></del>
Referee's Name	Signa	iture	
in Block Letters			
Position	Da	te	
Referee's Contact telephone nur	mber.		
Referee's Email			
Name of Educational Institute			<u></u>
Address of Institute			

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# RECOMMENDATION FORM

1					
To be completed by the app	olicant.				
Name of Applicant in Chi	inese		in Englis	:sh :	
Institute in Ch	inese		in Engli	sh :	
: Program applied	Full-tim	ne Master e Doctoral		Part-time Master Part-time Doctoral	
Registered Field: in Chines	se		_ in English	:	
Research Topic in Chines			<del></del>	:	
To be completed by the Ref 1 Please rate the applicant s tutored or other employees y	abilities in fo	ollowing asp	ects in compari	-	
	*	*	*	*	*
Intelligence	Excellent	Good	Satisfactory	Average or below	Not determined
Knowledge and Expertise					
Chinese Language Proficiency					
Creativity					
Perseverance					
Ability of Discernment					
*	5%	ó		6	%-20%
	219	%-50%			50%

<sup>\*</sup>Excellent indicates that the quality of the applicant being evaluated rank top 5% in comparison with other students or colleagues; Good indicates a rank of 6%-20%; Satisfactory indicates a rank of 21%-50%; Average or below indicates the a rank under 50%; Not determined indicates no sound information for judgment or not satisfactory.

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2

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Please indicate the strength of your recommendation by a ticking in the appropriate box.						
( )	( )	( )	( )			
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	Sign	ature				
in Block Letters						
D ''						
Position	Da		<del> </del>			
Referee's Contact telephone nu	mber.					
•						
Name of Educational Institute						
Address of Institute						
Telephone No.						