**TIGP - CBMB**

**Laboratory Rotation Application Form**

|  |  |  |  |  |  |  |  |  |  |  |
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| TIGP CBMB  Office only | □Laboratory Rotation Application Form  Laboratory Rotation Confirmation Form  □First Rotation □Second Rotation  □Third Rotation | | | | | | CBMB Secretary | | |  |
| Student Information | | | | | | | | | | |
| Name | | | |  | | | | | | |
| Year Enrolled | | | |  | | | | | | |
| Student ID Number | | | |  | | | | | | |
| Phone number | | | |  | | | | | | |
| Email | | | |  | | | | | | |
| Registered department and university | | | | □NTU IBS □NTU CHEM □NTU DGP  □NTHU CHEM □NTHU LS | | | | | | |
| First Rotation\* | | | | | | | | | | |
| Time | | 1 November – 31 December | | | | | | | | |
| Lab Supervisor | |  | | | | Supervisor’s Signature | |  | | |
| Second Rotation\* | | | | | | | | | | |
| Time | | 17 January – 18 March | | | | | | | | |
| Lab Supervisor | |  | | | | Supervisor’s Signature | |  | | |
| Third Rotation※ | | | | | | | | | | |
| Time | | 4 April – 3 June | | | | | | | | |
| Lab Supervisor | |  | | | | Supervisor’s Signature | |  | | |
| Student’s Signature | | |  | | Signature of Committee of CBMB | | | |  | |

\*necessary, ※optional