**TIGP - CBMB**

**Laboratory Rotation Application Form**

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| TIGP CBMBOffice only | □Laboratory Rotation Application FormLaboratory 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