重庆大学来华留学生导师接收意向表

FORM FOR PROVISIONAL ACCEPTANCE OF INTERNATIONAL STUDENTS BY CQU SUPERVISORS

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **以下信息请申请人填写（The following blanks are to be filled by the applicant）** | | | | | | | | | | | | |
| 姓名  Name |  | | 国籍Nationality |  | | | 性别  Gender |  | | | 护照号码  Passport No. |  |
| 申请院系  School | | |  | | | | 申请专业  Major | | |  | | |
| 授课语言  Language of Instruction | | | □汉语Chinese  □英语English | | | 申请学习时间  Duration of Study | | |  | | | |
| 申请学历层次  Category | | | □硕士Master’s degree □博士Doctoral Degree | | | | | | | | | |
| **以下信息请导师进行填写。请在充分了解学生学业背景的基础上，从学生的学术水平和语言能力等方面进行评价给出具体评价，明确是否接收。**  **(The following blanks are to be filled in by the supervisor. Please comment on the applicant’s academic and language competence, and specify whether to accept the applicant or not. )** | | | | | | | | | | | | |
| 导师姓名  Name | |  | | | 所属院系（公章）  College/Department（Stamp） | | | | |  | | |
| 联系电话  Tel. | |  | | | 联系邮箱  Email | | | | |  | | |
| 导师意见（Supervisor’s Comments）:    签名（Signature）  日期（Date） | | | | | | | | | | | | |
| 请导师清楚填写自己的姓名、电话和邮箱，以避免可能的辨识和登记错误。谢谢！  Please make sure to write the name, telephone number and email address of the supervisor clearly and neatly to avoid the possible identification and registration error, thank you for your understanding and support. | | | | | | | | | | | | |

**注：本表只作为留学生申请重庆大学入学的支撑材料，不视为重庆大学的录取凭证。**

**Note：This form can be used as a supporting document for the application for studying at Chongqing University. It CANNOT be considered as an official letter of admission from Chongqing University.**