**Application Form for Requesting Office Space for Grant Project-Appointed Research Assistants** Application Date (Year/Month/Day)：

|  |  |  |
| --- | --- | --- |
| Name of Research Assistant |  |  □Male □Female |
| Position Title | □Researcher □Associate Researcher □Assistant Researcher □Postdoctoral Researcher □Project Research Assistant |
| Contact Information  | Cell-phone:EMAIL: |
| Employment Start Date |  |
| (Grant) Project title |  |
| (Grant) Project Funding Amount |  |
| Requesting Party |  |
| Project Duration  | FROM (Year/Month/Day) TO (Year/Month/Day)  |
| Employment Period | FROM (Year/Month/Day) TO (Year/Month/Day)  |
| Principal Investigator Signature  |  |
| Review Results * Approved
* Not Approved

------------------Allocation Results | □ Third Assistant Office《4044-3》 ⇨ Seat Number: \_\_\_\_\_\_\_\_\_\_□ Third Assistant Office《 3039 》 ⇨ Seat Number: \_\_\_\_\_\_\_\_\_\_□ Third Assistant Office《 0043 》 ⇨ Seat Number: \_\_\_\_\_\_\_\_\_\_ |
| Signature of Supervisor |  |

Note: Please attach 1) grant funding approval list, 2) recommended appointment form, 3) Approved labor contract or other related documentation at the time of application.

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| * I hereby declare that I have fully read and agreed to the terms stated under the ‘National Sun Yat-Sen College of Management Regulations for Requesting Office Space for Grant Project-Appointed Research Assistants’.

Date of Key Pick-up: **\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_ Signature:** Date of Key Return：\_\_\_\_\_\_**/\_\_\_\_\_\_/\_\_\_\_\_\_** Note: When borrowing property of the College, please take responsibility in taking care of it. If damage occurs, you are responsible for the restoration or full compensation of damages.  |

國立中山大學

管理學院計畫專任助理研究室座位申請表

申請日期： 年 月 日

|  |  |  |
| --- | --- | --- |
| 助理姓名 |  |  □男 □女 |
| 職稱 | □研究員 □副研究員 □助理研究員 □博士後 □專任助理 |
| 聯絡方式 | 手機：EMAIL： |
| 到職日期 |  |
| 計畫名稱 |  |
| 計畫核定經費 |  |
| 委託單位 |  |
| 執行期限 | 自 年 月 日至 年 月 日止 |
| 聘用期限 | 自 年 月 日至 年 月 日止 |
| 主持人簽章 |  |
| 審查結果* 通　過
* 不通過

------------------分配結果 | □ 第一助理室《4044-3》 ⇨ 座位編號：\_\_\_\_\_\_\_\_\_\_□ 第二助理室《 3039 》 ⇨ 座位編號：\_\_\_\_\_\_\_\_\_\_□ 第三助理室《 0043 》 ⇨ 座位編號：\_\_\_\_\_\_\_\_\_\_ |
| 　主管簽章 |  |

註：申請時，請檢附➀計畫經費核定清單、➁聘用建議表或➂勞動契約書(核定)或其他相關證明。

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| □本人已閱讀並同意遵行國立中山大學管理學院專任助理研究室座位申請管理辦法領取鑰匙日期：\_\_\_\_\_\_**/\_\_\_\_\_\_/\_\_\_\_\_\_** 簽章：歸還鑰匙日期：\_\_\_\_\_\_**/\_\_\_\_\_\_/\_\_\_\_\_\_** 註：**借用本院之財物，請自行負責保管及妥善維護；如有毀損，應恢復原狀或照價賠償。** |