

附表 C Schedule C

吳鳳科技大學 學生校外實習意見調查表

WuFeng University Student Off-Campus Internship Feedback Survey

填寫日期：____年____月____日
Date of completion: ____Year____month____day

申請人資料 Applicant Information

系 名 稱 Department		班 級 Class	
姓 名 Name			
學 號 Student ID		聯絡電話 Contact Number	

實習單位媒合結果 Match Results of Internship Placement

- ☐ 媒合成功，請依規定辦理校外實習申請作業。
Successfully matched. Please proceed with the off-campus internship application in accordance with the regulations.

媒合廠商 Matched Company : _____

- ☐ 媒合不成功－請填寫原因
Unsuccessful Match – Please Specify the Reason

原因 Reason : ☐ 學生對於廠商所提供之職缺均無實習之意願
The student has no intention to intern in any of the positions offered by the company.

☐ 其他 Others : _____

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