**財團法人南投縣私立德安啟智教養院**

**社會工作相關學系實習申請表**

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| **基 本 資 料** | | | | | | | | | | | | | | | |
| 姓 名 |  | | 性別 | | | |  | 生 日 | |  | | | 一吋半身脫帽近照 | | |
| 學 校 |  | | 科系 | | | |  | | | | | |
| 住 址 |  | | | | | | | | | | | |
| 電 話 |  | | | | | | | 手機 |  | | | |
| e-mail |  | | | | | | | 駕 照 | □機車 □小客車 | | | | | | |
| 健 康 | □良好 □正常 □稍差 □不佳→原因： | | | | | | | | | | | | | | |
| **學歷(請寫高中職/大學)** | | | | | | | | | | | | | | | |
| 學 校 名 稱 | | | | | 科 系 | | | | 畢 業 日 期 | | | | | 畢 業 狀 況 | |
|  | | | | |  | | | |  | | | | | □是 □否 | |
|  | | | | |  | | | |  | | | | | □是 □否 | |
| **服務經歷** | | | | | | | | | | | | | | | |
| 單 位 名 稱 | | | | | | 服務內容 | | | | | | 服務時間 | | | |
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| **緊 急 連 絡 人** | | | | | | | | | | | | | | | |
| 姓 名 | | 關 係 | | 電 話 | | | | 姓 名 | | | 關 係 | | | | 電 話 |
|  | |  | |  | | | |  | | |  | | | |  |
| **專長/興趣** | | | | | | | | | | | | | | | |
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| **申請本院為實習場域之原因** | | | | | | | | | | | | | | | |
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| **概述曾與身心障礙者互動之經驗與心得(無則免)** | | | | | | | | | | | | | | | |
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(表格不夠填寫自行增行)