義守大學校外實(見)習課程訪視學生督導記錄表

Records of Supervision for Off-Campus Internship Courses, I-Shou University

開課系級			課程名	召稱							
Dept.			Course	Title							
實習機構											
名稱/部門											
Internship Company/Dept.											
訪視日期	年	 月	———— 日(星期)	時	分	 至	 時			
Date of Visit	y	m	d (Day of the	week:)	Time:			74		
學生姓名 Name of Student(s)							(Num	() nber of St)	
			訪視	內容							
			Details of								
實習機構接洽人簽章:						_ (年	月	日)		
Signature of	Internship	Contac	ct Person:				(y	m	d)	
訪視教師簽章:					条主任簽章:						
Signature of Instructor:				Signa	Signature of Dept. Chair:						

【備註】: 1. 訪視時間每次至少1小時,訪視費以1小時為基準計算。

The duration of each visit should last at least an hour. The instruction fees are counted hourly.

2. 申請差旅費、指導費以及陳報告書皆應附本督導記錄表,並請以正本申請差旅費。 This form should be attached when applying for travel allowances and instruction fees and filling out the application form. The original of this form should be provided to apply for travel allowances.