

## 利音貿易開發股份有限公司特殊教育獎學金設置辦法

(83.4.26) 82學年度第八次系務會議修訂通過

(102.4.2) 101學年度第五次系務會議修訂通過

(104.10.13) 104學年第二次系所務會議修正通過

(113.5.7) 112學年度第七次系所務會議修正通過

- 一、緣起：利音貿易開發股份有限公司為鼓勵青年學生在校期間勤研特殊教育，並於畢業後從事特殊教育、復健諮商與高齡福祉相關工作，特於國立臺灣師範大學特殊教育學系設置獎學金。
- 二、名稱：利音貿易開發股份有限公司特殊教育獎學金。
- 三、名額：本系學生四名（其中至少一名限頒給聽覺障礙學生）。
- 四、金額：每名壹萬元。
- 五、申請資格：國立臺灣師範大學特殊教育學系、復健諮商與高齡福祉研究所學生。
- 六、時間：每年一次（於公告時限之內受理申請）。
- 七、手續：由申請者填妥申請表一份並檢附成績單逕交系所辦公室辦理。
- 八、評選標準：
  - （一）學業總平均成績。
  - （二）熱心公益、積極參與學校及系活動者。
  - （三）參與特教（含復健諮商與高齡福祉）工作經歷與服務績效。
  - （四）研究生以全職生為優先考慮。
- 九、核發：申請日期截止後，由系所務會議議決，核定得獎名單後頒發。
- 十、本辦法經系所務會議討論通過後實施，修正時亦同。

# 利音貿易開發股份有限公司特殊教育獎學金申請書

( ) 學年度

申請人資料	姓名		聯絡電話/行動電話					
	學號		電子信箱					
	系(所)級	<input type="checkbox"/> 大學部      年級； <input type="checkbox"/> 特教碩      年級； <input type="checkbox"/> 復諮高齡碩      年級						
	通訊處	現在： 永久：						
	身分證字號		郵局局號	郵局帳號				
學年(期)	第一學年		第二學年		第三學年		第四學年	
成績	上學期	下學期	上學期	下學期	上學期	下學期	上學期	下學期
學業成績								
曾參與特教 (含復諮與 高齡福祉) 工作簡歷	工 作 內 容						期 間 起 迄	
證明文件	<input type="checkbox"/> 歷年學業成績單 <input type="checkbox"/> 曾參與特教(含復諮與高齡福祉)工作證明							
申請人簽名：		蓋章						
		申請日期：    年    月    日						
審查結果	<input type="checkbox"/> 通過 <input type="checkbox"/> 不通過							

# **Regulations for the Implementation of the Ring-in Special Education Scholarship**

Amended by the 8th Departmental Meeting of the 1993 Academic Year on April 26, 1994

Amended by the 5th Departmental Meeting of the 2012 Academic Year on April 2, 2013

Amended by the 2nd Departmental Meeting of the 2015 Academic Year on October 13, 2015

Amended by the 7th Departmental Meeting of the 2023 Academic Year on May 7, 2024

1. Background: To encourage students to study special education diligently in university and dedicate themselves to careers in special education or rehabilitation counseling and gerontological wellbeing after graduation, the Ring-in Trading Development Company established the Ring-in Special Education Scholarship (hereafter the Scholarship) for the NTNU Department of Special Education (hereafter the Department).
2. Name: Ring-in Special Education Scholarship.
3. Quota: Four students from the Department, at least one of whom must be a student with hearing impairment.
4. Amount: NT\$10,000 per awardee.
5. Eligibility: Students from the NTNU Department of Special Education or Graduate Institute of Rehabilitation Counseling.
6. Time: Once per year within the deadline announced by the Department.
7. Procedure: Each applicant must complete one copy of application form and submit it to the office of the Department along with their academic transcript.
8. Selection criteria:
  - (1) Cumulative GPA
  - (2) Demonstrate enthusiasm about public welfare and active participation in school and department activities.
  - (3) Have work and volunteer service experience in special education, including rehabilitation counseling and gerontological wellbeing.
  - (4) For graduate students, full-time students are prioritized.
9. Issuance: After the application deadline, the list of winners shall be decided and approved by the departmental meeting. The Scholarship shall be awarded accordingly.
10. These regulations and revisions thereof shall be discussed, approved, and implemented by the departmental meeting.

# Application Form for the Ring-in Special Education Scholarship

Academic Year \_\_\_\_\_

Applicant information	Name		Phone/Mobile					
	Student ID		E-mail					
	Department/ institute and year	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate Institute of Special Education <input type="checkbox"/> Graduate Institute of Rehabilitation Counseling Year: _____						
	Contact address	Current:  Permanent:						
	National ID		Branch code	Postal savings account				
Academic Year Grade	Freshman		Sophomore		Junior		Senior	
	1st semester	2nd semester	1st semester	2nd semester	1st semester	2nd semester	1st semester	2nd semester
Academic grade (GPA)								
Work experience in special education (including rehabilitation counseling and gerontological wellbeing)	Job details						Period	
Proof documents	<input type="checkbox"/> Full academic transcript <input type="checkbox"/> Proof of work in special education (including rehabilitation counseling)							
Applicant signature:				Stamp:				
Application date (mm/dd/yyyy): _____								
Review result	<input type="checkbox"/> Approved <input type="checkbox"/> Rejected							

