



中国药科大学

CHINA PHARMACEUTICAL UNIVERSITY

Only for Jasmine full scholarship and
CPU president scholarship

中国药科大学外国留学生奖学金年度评审表
Annual Review of Scholarship Status
China Pharmaceutical University

中文名/Chinese Name: _____ 学号/Student No. _____

护照用名/Passport name: _____

出生日期/Date of Birth: _____年/Year _____月/Month _____日/Day 性别/Sex: _____

国籍/Nationality: _____ 学生类别/Student Category: _____

所享受的奖学金类别/ Supported by: 江苏政府奖学/Jasmine full scholarship

留学生校长奖学金/CPU president scholarship

学习期限/Duration of study

From _____年/Year _____月/Month 至 to _____年/Year _____月/Month

所在院系/School affiliated: _____ 学习专业/Major: _____

电话/Cell Phone: _____ Email: _____

本人在上年度学的学习及表现情况/progress report of study and conducts in the past year:

本人签字/Signature: _____ 日期/Date: _____年/Year _____月/Month _____日/Day

导师或辅导员意见/Comments from supervisor for master and PhD candidate/teaching advisor for undergraduate

签字/Signature: _____ 日期/Date: _____ 年/Year 月/Month 日/Day

The following part is to be finished by Section of International Student.

该生本学年主要课程考试成绩及所获学分情况/Scores and credits earned:

学习态度/learning attitude: 很好/Very good , 好 /Good, 一般/Fair , 差/Poor

考勤情况/Attendance: 很好/Very good , 好 /Good, 一般/Fair , 差/Poor

行为表现和奖惩情况/Conducts, merits and demerits:

上年度奖学金评审情/Review result of last year: 合格/Pass 不合格/Fail

评审意见/Review result: 合格/Pass 不合格/Fail

建议/Decision: 继续提供奖学金/Continue

中止提供奖学金/Suspend 取消奖学金/Cancel

负责人签字: _____

盖章:

日期: _____年____月____日