**上海外国语大学孔子学院国际中文教师申请表**

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| **申请人简况** | | | | | | | | | | | | | | | | | | |
| 姓名 |  | | 性别 | | | | | | |  | 出生日期 | | | |  | | 近期、白底  免冠、一寸彩照 | |
| 身份证号 |  | | | | | | | | | | 婚姻状况 | | | |  | |
| 民族 |  | | | | | | | | | | 籍贯 | | | |  | |
| 现工作单位 |  | | | | | | | | | | 单位所在地 | | | |  | |
| 参加工作年月 |  | | 专技职称 | | | | | | | |  | | | | 行政职务 | |  | |
| 家庭电话 |  | | 手机号码 | | | | | | | |  | | | | 电子邮箱 | |  | |
| 现居住地址 |  | | | | | | | | | | | | | | 邮政编码 | |  | |
| 最高学历学位 |  | | 毕业学校 | | | | | | | |  | | | | 所学专业 | |  | |
| **个人家庭情况** | | | | | | | | | | | | | | | | | | |
| 配偶情况 | 姓名 |  | | | | | | | | 国籍 | |  | | | 联系电话 | |  | |
| 工作单位 | | | | | |  | | | | | | | | 是否随任 | |  | |
| 子女情况 | 姓名 | | |  | | | | | 年龄 | | | |  | | 是否随任 | |  | |
| 姓名 | | |  | | | | | 年龄 | | | |  | | 是否随任 | |  | |
| **教育经历（从高中开始，含重要培训经历）** | | | | | | | | | | | | | | | | | | |
| 毕业学校 | | 专业 | | | | | | | | 开始时间 | | | | 结束时间 | | 所获学历  学位名称 | | |
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| **国内外教学经历**  **（由早至今排序，三个月以上空白经历，请注明待业）** | | | | | | | | | | | | | | | | | | |
| 工作单位 | | 开始时间 | | | | | | | | 结束时间 | | | | 工作内容 | | | | |
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| **外语水平（注明：熟练、较好、一般、较差）** | | | | | | | | | | | | | | | | | | |
|  | 语种 | | | | | | | 阅读 | | | 写作 | | | | 会话 | | | 听力 |
| 第一外语 |  | | | | | | |  | | |  | | | |  | | |  |
| 第二外语 |  | | | | | | |  | | |  | | | |  | | |  |
| **获得证书情况** | | | | | | | | | | | | | | | | | | |
| 证书名称 | | | | | 获得年月 | | | | | | | | | | 颁证单位 | | | |
| 普通话证书 | | | | |  | | | | | | | | | |  | | | |
| 外语水平证书 | | | | |  | | | | | | | | | |  | | | |
| 国际中文教师证书 | | | | |  | | | | | | | | | |  | | | |
| 其他 | | | | |  | | | | | | | | | |  | | | |
| **参与国际中文教育工作获奖情况** | | | | | | | | | | | | | | | | | | |
| 获奖名称 | | | | | | 获奖年月 | | | | | | | | | 颁奖单位 | | | |
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| **参与国际中文教育项目或科研情况** | | | | | | | | | | | | | | | | | | |
| 项目名称 | | | | | | | | | | 主要工作内容 | | | | | | | | |
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| **自我鉴定** | | | | | | | | | | | | | | | | | | |
| 对孔子学院国际中文教师的认识，对自身性格特点、汉语教学技能、工作经验和赴外适应能力做出客观评价。限1000字以内。 | | | | | | | | | | | | | | | | | | |
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| **本人郑重承诺上述所填内容及提交的其他材料真实无误，如上述信息虚假不实，愿意承担因此造成的一切责任和后果。**  **申请人签名：**  **年 月 日** | | | | | | | | | | | | | | | | | | |