附件一 Attachment 1

# 中國醫藥大學學生申訴申請表 申訴時間：

**China Medical University Student Appeal Form** Appeal Date:

| 系別 Department | | 姓名 Name | | 學號 Student ID | |
|---|---|---|---|---|---|
| 申訴事由及事實 Appeal Reason and Fact | | | | | |
| | | | | | |
| 以往處理情形 Previous handling of the case | | | | | |
| | | | | | |
| 希望獲得救濟事項 Expected remedy | | | | | |
| | | | | | |
| 申訴人簽章 Signature of Appellant： | | | | | |
| 承辦人蓋章 Signature of Person in charge： | | | 受理日期Date of acceptance： | | |

附件二Attachment 2

# 中國醫藥大學學生申訴案件申請人具結書

China Medical University Affidavit for Student Appeal Submission

今親自提出申訴當據實陳述絕無虛構匿飾或故意誹謗情事。

I hereby confirm that I file a complaint in person today with factual statement. There is no fabrications, concealments or intentional defamations.

此　　結

（簽名蓋章 Signature and seal）

具結人 Appellant

中　華　民　國(Date)　　年(Y)　　月(M)　　日(D)

附件三 Attachment 3

# 中國醫藥大學學生申訴案件申請人撤案具結書

China Medical University Affidavit for Student Appeal Withdrawal

今親自提出撤回申訴，事後決不追究或因故散播未經評議委員會認定之情事。

I hereby confirm that I withdraw the appeal in person today. I will not pursue or disseminate information about the case(s) that have not been identified by the Student Grievances Committee.

此　　結

（簽名蓋章 Signature and seal）

具結人 Appellant

中　華　民　國(Date)　　年(Y)　　月(M)　　日(D)