**2025 UAiTED Faculty Exchange Scholarship Application Form**

**A: Personal Information:**

Name: （First）（Middle）（Last）

Chinese Name： （If Any）

Gender：□ M □ F

Date of Birth：\_\_\_\_\_\_\_\_Y\_\_\_\_\_\_\_\_\_M\_\_\_\_\_\_\_\_\_D

**Highest Education and Specialty**

Institution： Degree： Major：

**Affiliation**

University: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_

**B: Application Information:**

**B1. Area For Exchange: (Only one group can be selected)**

* Biotechnology and Healthcare □ Sustainability
* ICT (Incld. Semiconductors, Communications, IT, AI etc.) □Social Sciences and Humanities
* CHaMP (the medical professionals from the nine CHaMP member hospitals only)

**B2. Purpose of Exchange:**

**B3. Anticipated Research Outcomes:**

**B4. Duration of Exchange:** (Please write the estimated communication period, EX: June 7-20)

**B5. Host information :  
University:**   
□ City University of Hong Kong  
□ Nanyang Technological University  
□ National Central University  
□ National Cheng Kung University  
□ National Chengchi University  
□ National Taiwan Normal University  
□ National Taiwan University of Science and Technology  
□ National Tsing Hua University  
□ National University of Singapore  
□ National Yang Ming Chiao Tung University  
□ The Hong Kong University of Science and Technology  
□ Universiti Kebangsaan Malaysia  
□ Universiti Malaya  
□ Universiti Putra Malaysia  
□ Universiti Sains Malaysia  
□ Universiti Tunku Abdul Rahman

**CHaMP:**□ National Cheng Kung University Hospital  
□ National Yang Ming Chiao Tong University Hospital (Lan-Yang Hospital Branch)  
□ NUHS(National University Hospital, Singapore)  
□ Tan Tock Seng Hospital  
□ Hospital Sultan Abdul Aziz Shah, UPM  
□ University of Malaya Medical Centre (UMMC)  
□ Hospital Pakar Universiti Sains Malaysia   
□ Hospital Universiti Tunku Abdul Rahman  
□ Hospital Canselor Tuanku Muhriz UKM

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B6. Budget:** (Please provide a breakdown of anticipated expenses for the exchange period)

Travel: $ ( Flight tickets, local transportation)

Accommodation: $\_\_\_ \_\_\_\_\_\_

Insurance: $\_\_\_ \_\_\_\_\_\_

Total Budget: $\_\_\_\_\_\_ (The budget is capped at $5,000 USD)