退宿申請書

學生	_ 系級	學號
因□休、退、轉學□畢業	業□校外租屋□外地賃	實習□與室友生活作息不合
□無法適應宿舍生活	□勒令退宿□其他	
故需申請退宿,原先住?	宿館房第_	床,懇請學校長官體察
實情,准予學生退宿。(學期中退宿,除休學、	退學、轉學者或特殊情況經學
務處核准外,一律不退費;	如涉及退費事宜,請檢	· 附繳費單)
立 書 人:		簽章
手 機:		
法定代理人:		簽章 (未滿 18 歲需簽章)
手 機:		
中華	民 國 年	月日

註:高雄醫學大學基於退宿申請之目的,須蒐集法定代理人及學生之姓名、電話,以在退宿申請作業期間及地區內進行必要之聯繫及辦理退費。當事人得就個人資料行使更改、刪除等個人資料保護法之權利,請洽本校生活輔導組。

承辦單位	會辨單位	決行
承辦人		學務長
生輔組組長		
秘書		

保存期限:1年 QP-07-05-01-10

Dormitory Withdrawal Application

ame: Departmen	t / Grade:	Student No.:
Suspension, dropout, transf	er □Gradı es'lifestyl	Student No.: uation
To be withdrawn from dormit	orv $\square 0$ thei	r:
orm: / Room No.:		r:/ Bed No.:
I hereby declare the request for oplication.	canceling the	dorm assignment and will be pleased with your agreement on this
There won't be a refund except for uring the semester; a payment slip		ho are suspended, withdrawal, transferred or approved by OSA the refund related matters.)
Signature of Applicant:		<u> </u>
ID card number:		
Contact Phone: (M)	/ (H)	
Signature of Parent / Guardian: _		(please sign if you are under 18)
Contact Phone: (M)	/ (H)	
Application Date:		(yyyy/mm/dd)

For the purpose of the application in KMU, personal information of the legal representative and the student shall be collected to carry out the necessary contact and refund for the procedure. Based on Personal Information Protection Act, you have the right to change or delete any personal data. If you need to do so, please contact our Division of Student Assistance.

% Please attach the receipt to complete the canceling process.

承辦單位 Case Handling Unit	會辦單位 Countersignature Unit	決行 Decision Unit
承辦人 Case Officer		學務長 Vice President for Student Affairs
生輔組組長 Director of Division of Student Assistance		
秘書 Secretary		

Data retention period:1 year