**國立成功大學智慧半導體及永續製造學院**

**學年度 學期業界專家協同教學****課程經費補助申請計畫書**

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| **一、課程基本資訊** | | | | | | | | | | | | | | | | | |  |
| 開課學院 | | | |  | | | | | | | | 開課單位 |  | | | | |  |
| 課程碼 | | | |  | | | | | | | | 課程名稱 |  | | | | |  |
| 必/選修 | | | | □必修  □選修 | | | | | | | | 學分數 |  | | | | |  |
| 教學方式/類別 | | | | □實作課程  □非實作課程 | | | | | | | | | | | | | |  |
| 彈性密集課程 | | | | □是(上課日期及起訖時間： )  □否 | | | | | | | | | | | | | |  |
| 開課年級 | | | | □碩  □博 | 授課語言 | | | | | □中文  □英文 | | 預計本學院學生選課人數 |  | | | | |  |
| 業界專家參與人數 | | | |  | | | | | | | | 業界專家參與時數合計 | 小時 | | | | |  |
| 授課老師**(主開課老師請打\*)** | | | |  | | | | | | | 職稱 | □教授 □副教授 □助理教授 | | | | | |  |
| 電話 |  | | | | | |  |
| e-mail |  | | | | | |  |
| 連絡人員  **(無則免填)** | | | |  | | | | | | | 職稱 |  | | | | | |  |
| 電話 |  | | | | | |  |
| e-mail |  | | | | | |  |
| **二、課程規劃及特色** | | | | | | | | | | | | | | | | | |  |
| 1.教學規劃 | | | |  | | | | | | | | | | | | | |  |
| 2.引進業界專家的初衷 | | | |  | | | | | | | | | | | | | |  |
| 3.業界專家參與教學之模式 | | | |  | | | | | | | | | | | | | |  |
| 4.業界專家於課程上之影響 | | | |  | | | | | | | | | | | | | |  |
| **三、授課大綱及進度表(含業界專家參與實作教學授課大綱、內容及時數)** | | | | | | | | | | | | | | | | | |  |
| 教學目標 | | | |  | | | | | | | | | | | | | |  |
| |  |  |  |  | | --- | --- | --- | --- | | 週次 | 授課內容 | 時數 | 業師姓名 | | 1 |  |  |  | | 2 |  |  |  | | 3 |  |  |  | | 4 |  |  |  | | 5 |  |  |  | | 6 |  |  |  | | 7 |  |  |  | | 8 |  |  |  | | 9 |  |  |  | | 10 |  |  |  | | 11 |  |  |  | | 12 |  |  |  | | 13 |  |  |  | | 14 |  |  |  | | 15 |  |  |  | | 16 |  |  |  | | 17 |  |  |  | | 18 |  |  |  | | 合計 | |  | 小時 | | | | | | | | | | | | | | | | | | |  |
| **四、業界專家基本資料** | | | | | | | | | | | | | | | | | |  |
| 序號 | 姓名 | | | 服務單位 | | | 職稱 | | 學歷 | | | | 專長  (與學程專業領域相關) | | | | 是否提供實習 |  |
| **1** |  | | |  | | |  | |  | | | |  | | | |  |  |
| **2** |  | | |  | | |  | |  | | | |  | | | |  |  |
| **五、業界專家提供產業實作內容(無則免填)** | | | | | | | | | | | | | | | | | |  |
| 1.實作名額 | | | |  | | | | | | | | | | | | | |  |
| 2.實作場域 | | | |  | | | | | | | | | | | | | |  |
| 3.實作內容 | | | |  | | | | | | | | | | | | | |  |
| 4.實作目標 | | | |  | | | | | | | | | | | | | |  |
| **六、教學成效之呈現及評估方式** | | | | | | | | | | | | | | | | | |  |
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| **七、業界專家參與教學成效評估方式** | | | | | | | | | | | | | | | | | |  |
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| **八、請簡述去年課程的成果表現** | | | | | | | | | | | | | | | | | |  |
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| **九、本次申請案之課程規劃與過去課程規劃之不同** | | | | | | | | | | | | | | | | | |  |
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| **十、其他補充資料** | | | | | | | | | | | | | | | | | |  |
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| **十一、擬申請補助金額** | | | | | | | | | | | | | | | | | |  |
| **經費項目** | | | | **單價** | | | | | | | **數量** | **小計（元）** | | | | | |  |
| 業師鐘點費 | | | |  | | | | | | |  |  | | | | | |  |
| 業師交通費 | | | |  | | | | | | |  |  | | | | | |  |
| 合 計 | | | | | | | | | | | |  | | | | | |  |
| **開課單位補助審核** | | | | | | | | | | | | | | | | | |  |
| **開課教師**  **簽章** | |  | | | | **開課單位承辦人簽章** | |  | | | | | | **開課單位主管簽章** | |  | |  |
| **學程課程委員會通過日期** | | | | |  | | | | | | | | | | | | |  |
| **學院補助審核** | | | | | | | | | | | | | | | | | |  |
| **教務學務處** | | |  | | **院課程委員會通過日期** | | | | |  | | | **院長** | |  | | |  |
| 備註：   1. 業師鐘點費**不得高於**[本校演講費支給標準](http://apps.acad.ncku.edu.tw/lecture/main/login.php?m=R)：專家每小時二千元。 2. 申請補助款之業師鐘點費須計入雇主負擔保費。 3. 每學位學程每學期至多可推薦1門課程申請補助。 4. 申請書請依規定時間內送件審核，並將**申請書電子檔**寄至學程承辦人信箱。 5. 審核單位請佐附課程委員會會議紀錄。 6. 前期成果報告書內容列入本次課程補助參考。 | | | | | | | | | | | | | | | | | |  |