**學分學程認證檢核表**

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| **開課系所** |  | **業界代表** |  |
| **學程名稱** |  | **公司職稱** |  |
| **培育人才**  (請符合UCAN職能與職業的相關職業) | 1.  2.  3. | **任職公司** |  |
| 業界代表必須符合：  1.具相關工作經歷三年以上。2.現任主管職位。 | |

本學程規劃下列「專業選修」課程，請委員參考【附件一】相關資訊並給予建議，以玆未來參考：

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| **課程名稱** | | **課程相關建議** | | | |
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| **建議事項(如應加入課程名稱、教學內容或其他相關評論)：** | | | | **教師回饋意見：** | |
| **業界代表簽名** | | | **訪談教師簽名** | | 年 月 日  **：** **～** **：** (需滿50分鐘) |

正本請送回課務組留存，影本送會計室作帳。

**學分學程地圖**

**※課程規劃**

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| --- | --- | --- | --- |
| **學期** | **大二** | **大三** | **大四** |
| **上** |  |  |  |
| **下** |  |  |  |

**※內容概要**

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| **課程名稱** | | **課程內容概要說明** |
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(篇幅不夠請自行增加頁數)