

# Giving to National Taiwan *Ocean* University

Please enter the following identifying information and fax to 886-2-2463-4096,  
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Date/     /     /

I. Donor Information			
Name/Company Name	(Chinese)	(English)	
E-mail Address		Phone Number	
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Address			
Affiliation		Job Title	
For NTOU Alumni only	Year of Degree _____ Department / Institute _____		

II. Contribution Details			
Amount of Contribution	NTD\$	USD\$	Other Currency
<b>Purpose (Check One)</b> <input type="checkbox"/> University Endowment <input type="checkbox"/> Scholarship <input type="checkbox"/> Campus building <input type="checkbox"/> To _____ College / Department / Institute <input type="checkbox"/> Other _____ <input type="checkbox"/> Unrestricted - open to use for any purpose		<div style="text-align: right; color: red;">【本欄由校友服務中心填寫】</div> 捐款受贈單位： _____ 捐款屬性： <input type="checkbox"/> 1. 辦理講座及研討會 <input type="checkbox"/> 2. 館舍興建或修繕 <input type="checkbox"/> 3. 學生社團及校隊活動 <input type="checkbox"/> 4. 獎助學金 <input type="checkbox"/> 4-1 支持大學生短期出國計畫 <input type="checkbox"/> 4-2 惜福餐券 <input type="checkbox"/> 5. 急難救助 <input type="checkbox"/> 6. 其他 <input type="checkbox"/> 6-1 院系所務推展(含系所友會活動) <input type="checkbox"/> 6-2 研究及計畫 <input type="checkbox"/> 6-3 校慶 <input type="checkbox"/> 6-4 教職員社團 <input type="checkbox"/> 6-5 退休人員聯誼 <input type="checkbox"/> 7. 校務發展	

III. Type of Payment (Check one)	
<input type="checkbox"/>	<b>Check</b> Please make check payable to NTOU (National Taiwan Ocean University). Send the check along with this form to: National Taiwan Ocean University, Alumni Services Center, No.2, Beining Rd. Keelung, Taiwan 20224
<input type="checkbox"/>	<b>Wireless Transfer</b> Beneficiary Banker's Name: First Commercial Bank Sao Chuan Tou Branch 「第一商業銀行哨船頭分行(銀行代碼 0072436)」 Address: 57, Yi-1 Road Keelung City, Taiwan R.O.C Account Name: National Taiwan Ocean University A/C No.: 24330026365 (戶名「國立臺灣海洋大學 401 專戶」) SWIFT Code (Optional)/ FCBKTPWTPXXX
<input type="checkbox"/>	<b>Credit Card</b> <input type="checkbox"/> VISA <input type="checkbox"/> MASTER <input type="checkbox"/> Others _____ Credit Card Number <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> - <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> - <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> Expiration Date    _____ month _____ year  Issuing Bank _____      Signature _____

**Alumni Services Center of NTOU**

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