



# La Grange des Ecrins INTERN

(2" PHOTO)

PERSONAL INFORMATION	PERSONALITY AND INTERESTS
CHINESE NAME: ENGLISH NAME: DATE OF BIRTH: (DD/MM/YY) MOBILE: E-MAIL: DEPARTMENT: STUDENT NO.	
	WORK EXPERIENCES
SKILLS/PROFESSIONAL CERTIFICATION	LANGUAGE
	<input type="checkbox"/> ENGLISH _____ (Score) <input type="checkbox"/> OTHERS _____ (Score)
SUMMER INTERNSHIP PERIOD	DRIVER LICENSE
<input type="checkbox"/> Jun/July <input type="checkbox"/> Aug/Sept <input type="checkbox"/> Either one	<input type="checkbox"/> YES <input type="checkbox"/> NO

**STATEMENT OF PURPOSE (250 WORDS )**

Please save the file name as Student ID + Name + Internship Application

(e.g. S10088980 Dede Wei\_Internship Application)

And email your PDF file CV to Angela Yang [ayang@go.thu.edu.tw](mailto:ayang@go.thu.edu.tw) by 28/March/2025 Friday 22:00 p.m. Thank you!