

大同大學學位論文抽換申請書

Application for Replacement of Existing Thesis/Dissertation

申請日期：民國____年____月____日

Application Date: ____/____/____(YYYY/MM/DD)

姓名 Name		學位類別 Graduate Degree	☐ 碩士 Master ☐ 博士 Doctor	畢業年月 Graduation Date (YYYY/MM)	民國____年____月 ____/____
系所名稱 School/Department					
論文名稱 Thesis/Dissertation Title					
抽換原因 Reason for Replacement					
電子郵件 Email Address		聯絡電話 Contact Number			

申請人簽名：

Applicant Signature: _____

指導教授簽名：

Advisor Signature: _____

學校系所章戳：

Seal of the School/Department:

學校權責單位章戳：

Seal of the Authorization Institute：

【說明】

- 論文抽換申請書由論文作者填寫後，連同新版論文紙本及電子全文檔（含圖檔、聲音、影像、程式執行檔或其他檔案格式等檔案），經由學校發函提送本館申請。
- 抽換下架之紙本論文由本館保存，不對外公開。

【Notes】

- The application should be submitted by the university with an official letter, enclosed with the application form filled by the author, the revised printed copies of thesis/dissertations and the revised electronic files, including image files, audio-visual files, etc.
- The original printed copies will be preserved by the library without any public access.