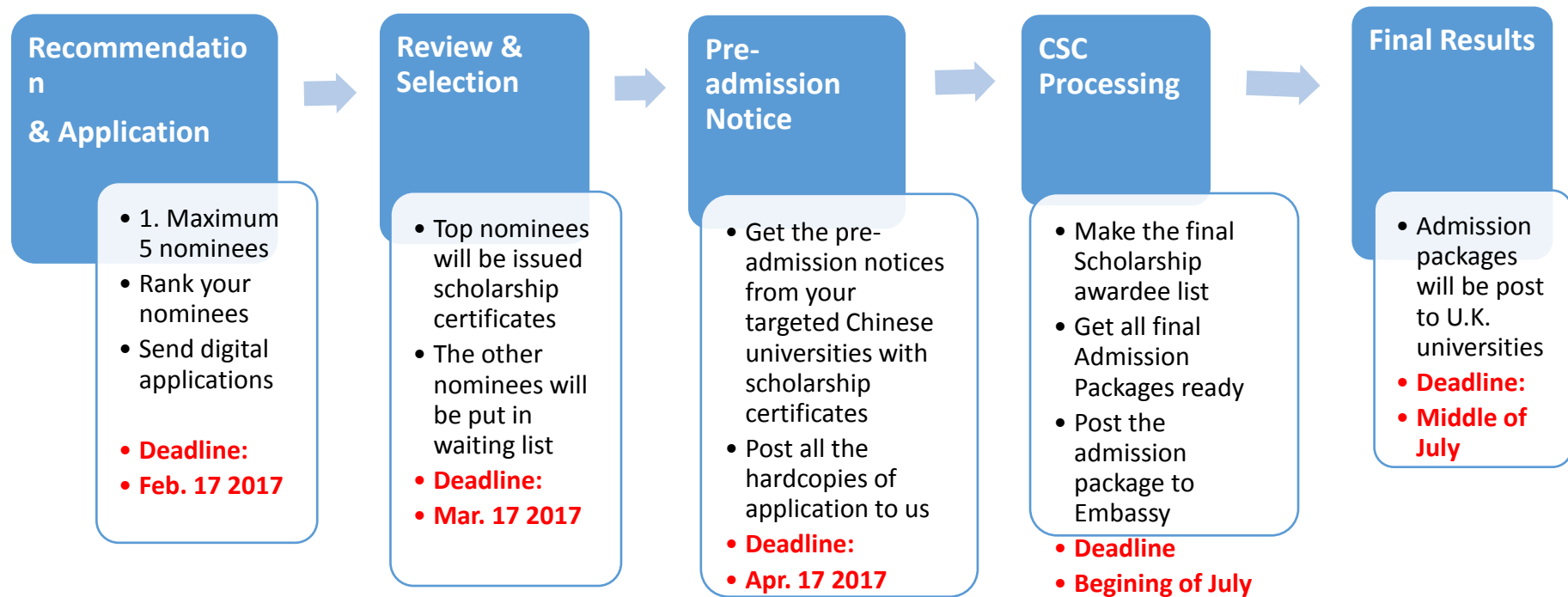


2017 Chinese Government Scholarship

Information & Procedure



2017/2018 Chinese Government Scholarship Application

The 2017/2018 Chinese Government Scholarship Application is now open for application.

Eligibility:

Applicants must

be a citizen of a country other than the People's Republic of China, and be in good health.

be a high school graduate under the age of 25 when applying for the undergraduate programs;

be a bachelor's degree holder under the age of 35 when applying for the master's programs;

be a master's degree holder under the age of 40 when applying for the doctoral programs;

be under the age of 45 and have a high school diploma (or higher) when applying for the general scholar programs;

be a master's degree holder or an associate professor (or above) under the age of 50 when applying for the senior scholar programs.

Application documents (in duplicates)

1. Application Form for Chinese Government Scholarship (written in Chinese or English);

2. Notarized highest diploma (photocopy);

Prospective diploma recipients must submit official document issued by your current school to prove your current student status or expected graduation date. Documents in languages other than Chinese or English must be attached with notarized Chinese or English translations.

3. Academic transcripts (written in Chinese or English);

Transcripts in languages other than Chinese or English must be attached with notarized Chinese or English translations.

4. A Study Plan or Research Proposal (written in Chinese or English);

This should be a minimum of 200 words for undergraduate students, 500 words for non-degree students, and 800 words for graduate students.

5. Two Recommendation Letters (written in Chinese or English);

Applicants for the graduate programs or the senior scholar programs must submit two recommendation letters signed by a professor or an associate professor.

6. A CD of your own works (only required for arts students);

Applicants for music studies are requested to submit a CD of their own musical works. Applicants for the fine arts programs must submit a CD of their own works which include two sketches, two color paintings and two other works.

7. Valid documents of your legal guardians in China (only required for applicants under the age of 18);

8. Foreigner Physical Examination Form (photocopy), (written in English, only required for applicants planning to stay in China for more than 6 months, can be downloaded

from <http://www.csc.edu.cn/laihua> or <http://www.campuschina.org>); The physical examinations must cover all of the items listed in the **Foreigner Physical Examination Form**. Incomplete forms or forms without the signature of the attending physician, or the official stamp of the hospital, or a sealed photograph of the applicant are considered as invalid. Please carefully plan your **physical examination schedule** as the result is valid for only 6 months.

9. The copy of **Pre-admission Letter from** designated Chinese university (if available);

10. The copy of **HSK Certificate** (if available).

All documents should be bound together on top left corner in the order of 6.1 to 6.10.

You should submit TWO sets of bound documents.

No application documents will be returned.

附件 3

发送：驻英国使馆

网上报名操作说明

Instructions of the CSC Online Application System for International Students

Step 1: Visit <http://www.csc.edu.cn/laihua> or www.campuschina.org and click “*Application Online for International Students*”.

Step 2: Read “*Tips for online application*” carefully before clicking “*NEXT*” to the registration page.

Step 3: After registration, log in with your user name and password. Choose *Chinese Government Scholarship* as your scholarship type unless you are applying for other Cooperation Program Scholarship.

Step 4: Fill in the correct **Agency Number**. An Agency Number represents a specific application receiving agency. It is listed in the first blank under the “PERSONAL DATA”. Please make sure you fill it in correctly, otherwise you will not be able to continue your online application or your application will not be accepted..

Your “**Agency Number**” is 8261.

Step 5: Fill in the **Online Application Form** truly, correctly and completely following the steps listed on the left of the page.

Applicants are required to select a discipline before choosing their majors. Please refer to the Disciplines Index, which could be downloaded from Help, if you have any doubt about the disciplines and majors.

Step 6: Click *Preview* and check your **Application Form** carefully before submitting it. Click *Confirmation of Submit* to submit your **Application Form**.

Step 7: Download the completed **Application Form** by clicking *Download Application* and print two hard copies.

Step 8: Prepare other supporting documents as required and send the full package of application documents (in duplicate) to the dispatching authorities.

Step 9: You can make changes to your application by clicking *Retrieve Application* on the left of the page. But make sure to submit it again by clicking *Confirmation of Submit* after finishing all the changes. Otherwise, the retrieved application will become invalid and your new application will not be received either.

- **Please use Internet Explorer (6.0 or 7.0). Menu selection functions may not work in other browsers.**
- **Only Chinese and English are accepted for the online application.**

外国人体格检查表

FOREIGNER PHYSICAL EXAMINATION FORM

姓名 Name		性别 Sex	<input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female	出生日期 Birthday		照片 (加盖检查单位印章)	
现在通讯地址 Present mailing address							Photo (Stamped Official Stamp)
国籍或地区 Nationality (or Area)		出生地 Birth place		血型 Blood type			
过去是否患有下列疾病：(每项后面请回答“否”或“是”) Have you ever had any of the following diseases? (Each item must be answered “Yes” or “No”)							
班疹 伤寒	Typhus fever	<input type="checkbox"/> No <input type="checkbox"/> Yes	菌 痢	Bacillary dysentery	<input type="checkbox"/> No <input type="checkbox"/> Yes		
小儿麻痹症	Poliomyelitis	<input type="checkbox"/> No <input type="checkbox"/> Yes	布氏杆菌病	Brucellosis	<input type="checkbox"/> No <input type="checkbox"/> Yes		
白 喉	Diphtheria	<input type="checkbox"/> No <input type="checkbox"/> Yes	病毒性肝炎	Viral hepatitis	<input type="checkbox"/> No <input type="checkbox"/> Yes		
猩 红 热	Scarlet fever	<input type="checkbox"/> No <input type="checkbox"/> Yes	产褥期链球	Puerperal streptococcus infection			
回 归 热	Relapsing fever	<input type="checkbox"/> No <input type="checkbox"/> Yes	菌 感 染		<input type="checkbox"/> No <input type="checkbox"/> Yes		
伤寒和付伤寒	Typhoid and paratyphoid fever				<input type="checkbox"/> No <input type="checkbox"/> Yes		
流行性脑脊髓膜炎	Epidemic cerebrospinal meningitis				<input type="checkbox"/> No <input type="checkbox"/> Yes		
是否患有下列危及公共秩序和安全的病症：(每项后面请回答“否”或“是”) Do you have any of the following diseases or disorders endangering the public order and security? (Each item must be answered “Yes” or “No”)							
毒物瘾	Toxicomania.....					<input type="checkbox"/> No <input type="checkbox"/> Yes	
精神错乱	Mental confusion.....					<input type="checkbox"/> No <input type="checkbox"/> Yes	
精神病	Psychosis: 躁狂型	Manic psychosis.....				<input type="checkbox"/> No <input type="checkbox"/> Yes	
	妄想型	Paranoid psychosis.....				<input type="checkbox"/> No <input type="checkbox"/> Yes	
	幻觉型	Hallucinatory.....				<input type="checkbox"/> No <input type="checkbox"/> Yes	
身高	厘米	体重	公斤	血压	毫米汞柱		
Height	CM	Weight	Kg	Blood pressure	mmHg		
发育情况	营养情况		颈部				
Development	Nourishment		Neck				
视力 左 L_____	矫正视力 左 L_____		眼				
Vision 右 R_____	Corrected vision 右 R_____		Eyes				
辨色力	皮肤		淋巴结				
Colour sense	Skin		Lymph nodes				
耳	鼻		扁桃体				
Ears	Nose		Tonsils				
心	肺		腹部				
Heart	Lungs		Abdomen				

脊柱 Spine		四肢 Extremities		神经系统 Nervous system																	
其他所见 Other abnormal findings																					
胸部 X 线 检查结果 (附检查报告单) Chest X-ray exam (attached chest X-ray report)				心电图 ECC																	
化验室检查 (包括艾滋病、 梅毒等血清学检查) Laboratory exam (attached test report of AIDS, Syphilis etc)																					
<p style="text-align: center;">未发现患有下列检疫传染病和危害公共健康的疾病： None of the following diseases of disorders found during the present examination.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">霍乱</td> <td style="width: 33%;">Cholera</td> <td style="width: 33%;">性病</td> <td style="width: 33%;">Venereal Disease</td> </tr> <tr> <td>黄热病</td> <td>Yellow fever</td> <td>肺结核</td> <td>Lung tuberculosis</td> </tr> <tr> <td>鼠疫</td> <td>Plague</td> <td>艾滋病</td> <td>AIDS</td> </tr> <tr> <td>麻风</td> <td>Leprosy</td> <td>精神病</td> <td>Psychosis</td> </tr> </table>						霍乱	Cholera	性病	Venereal Disease	黄热病	Yellow fever	肺结核	Lung tuberculosis	鼠疫	Plague	艾滋病	AIDS	麻风	Leprosy	精神病	Psychosis
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意见 Suggestion 医师签字 Signature of physician			检查单位盖章 Official Stamp 日期 Date																		