**僑光科技大學 學年度第 學期\_\_\_~\_\_\_月 課業/證照輔導 學生簽到表**

附件四

|  |  |
| --- | --- |
| **課程名稱：**  | **教師姓名：** |
| **輔導班級：** | **輔導地點：** |
| **受輔導人次共計： 人** |

|  |  |  |
| --- | --- | --- |
| **輔導日期** | **受輔導學生簽名(限修此課程之學生)** | **教學助理簽章** |
| **年** | **月** | **日** | **課輔起迄時間** | **班級** | **學號** | **簽名** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

1.協助課業或證照輔導類別之教學助理應填寫本表，並讓受輔導學生親自簽到。

2.若受輔導學生未出席，教學助理報告授課教師，督促其來上課。

3.累計每月輔導人次，並於期末與期末表單一同繳至教學發展中心存查。若表格不足，請自行延展。