*Southern Taiwan University*

*of Science and Technology*

\_\_\_\_\_ Academic Year \_\_\_\_ Semester

Class Meeting and

Meeting with Class Advisor

Records

Class:\_\_\_\_\_\_\_\_\_\_\_\_\_

Notifications:

1. Please fill in the plan of class management in the first week of the semester.
2. The records of class meeting or activities should be complete and signed by class advisor and chairman of the department.
3. Please submit the records to counseling and guidance division in the 16th week (final week).
4. According to the regulations, 6 records of class activities, 6 records of class advisor time and 3 records of ethics education at least are required.
5. Please keep the records properly.

*Thank you for your cooperation!*

Counseling and Guidance Division

Office: F202 room

Tel: +886-2533131 ext.2220~2222

*Southern Taiwan University of Science and Technology*

Plan of Class Management

|  |  |  |
| --- | --- | --- |
| Week No. | Theme | Activities |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| 9 | (Midterm) |  |
| 10 |  |  |
| 11 |  |  |
| 12 |  |  |
| 13 |  |  |
| 14 |  |  |
| 15 |  |  |
| 16 |  |  |
| 17 |  |  |
| 18 | (Final Term) |  |

Signature of Class advisor:\_\_\_\_\_\_\_\_\_\_\_

Signature of Department Chair:\_\_\_\_\_\_\_\_\_\_\_

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Record of Class Meeting Week No.\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| Time | ­­­\_\_\_/\_\_\_  \_\_\_:\_\_\_~\_\_\_:\_\_\_ | Classroom |  |
| Chairman |  | Recorder |  |
| Presence |  | Class advisor Signature |  |
| Absence (Name) |  | | |
| Summary of Meeting Discussion | | | |
|  | | | |

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Record of Meeting with Class advisor Week No.\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Time | ­­­\_\_\_/\_\_\_  \_\_\_:\_\_\_~\_\_\_:\_\_\_ | | Classroom |  |
| Presence |  | | Absence |  |
| Summary of Meeting Discussion | | | | |
|  | | | | |
| Summary of Ethics Education Discussion | | | | |
|  | | | | |
| Class advisor | |  | Department Chair |  |
| Counseling and Guidance Division | |  | Dean |  |