**Collaboratively Teaching Industry Expert’s Résumé & Course Information**

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| Name | |  | | Hiring department or graduate institute | | |  | | | | | | | | | | | | | | | Date | |  | | |
| Gender | | * Male * Female | | ID card number | | |  |  | |  | |  |  | |  | |  |  | |  |  | Contact phone number | |  | | |
| Highest degree obtained  Department or subject of study | |  | | | | | | | | | | | | | | | | | | | | Month & year of graduation | |  | | |
| E-mail | |  | | | | | | | | | | | | | | Do you agree to share your personal information with other colleges and universities as part of the Ministry of Education’s specialized personnel database? | | | | | | | | □yes  □No | | |
| Field of specialization | | □Engineering □Management □Finance □Humanities & society □Medicine, agriculture, or biotechnology □Culture & creativity □Tourism, food & beverage □Other | | | | | | | | | | | | | | | | | | | | | | | | |
| Present position | | Name of Department/Number of employees | | | Present position/Number of years | | | | | | | | | | | | Responsibilities | | | | | | | Practical experience you are able to share | | |
| 1.  2. | | | 1.  2. | | | | | | | | | | | | 1.  2. | | | | | | | 1.  2. | | |
| Characteristics of present company | | Company/Location | | | Main products or services | | | | | | | | | | | | Major collaborating companies | | | | | | | Main clients served | | |
|  | | | 1.  2. | | | | | | | | | | | | 1.  2. | | | | | | | 1.  2. | | |
| Mailing address | | □□□ | | | | | | | | | | | | | | | | | | | | Home phone number | |  | | |
| Home address | | □□□ | | | | | | | | | | | | | | | | | | | | Cell phone number | |  | | |
| Emergency contact person | |  | | Contact number | | |  | | | | | | | | | | | | | | | Relationship | |  | | |
| Candidate’s signature | |  | |  | | | | | **※ The information on this form is correct. I am willing to take legal responsibility.** | | | | | | | | | | | | | | | | | |
| Semester | Class | | Course name | | | | | | | | Number of credits | | | Hours per week | | | | | Number of instructional weeks | | | | Total number of collaboratively teaching hours | | | Originally assigned course instructor |
| Course number | | | | | | | |
|  |  | |  | | | | | | | |  | | |  | | | | | Week number \_\_\_ | | | |  | | |  |
|  | | | | | | | |
| Course syllabus  (State in list format) | | | Part of course collaboratively taught with industry expert | | | | | | | | | | | | | | | | | | | | | | | |
| Expected instructional outcomes  ( State in list format) | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Chair of Department or Graduate Institute | | | Dean of College | | | Staff at Project-Control Section | | | | | | | | | | | | | Head of Project-Control Section | | | | | | Dean of Academic Affairs | |
|  | | |  | | |  | | | | | | | | | | | | |  | | | | | |  | |

※ Collaboratively teaching hours per course during each semester (18 weeks) may not exceed 1/3 of the total number of instructional hours. Industry instructors may teach collaboratively a maximum of two courses.

**Hiring Assessment of Industry Expert for the \_\_\_ Academic Year**

(**Please attach résumé and course syllabus**)

Full-time instructor：

Application date： (mm/dd/yyyy)

|  |  |  |  |
| --- | --- | --- | --- |
| **I. Personal information：** | | | |
| Hiring unit： | | Semester： | |
| Name of industry instructor： | | Course： | |
| Employment unit： | | Number of hours： | |
| Position： | | Area of specialization： | |
| Years of employment： | | Location of employment：  \_\_\_ town of \_\_\_ city (county) | |
| **II. Assessment items and score** | | **Points received** | **Assessment conclusion** |
| 1.Suitability of candidate’s expertise（15 points） | |  | Total (out of maximum of 100 points)  \_\_\_\_\_\_\_**points** |
| 2.Candidate’s educational and professional background（15 points） | |  |
| 3.Candidate’s years of work experience（10 points） | |  |
| 4.Candidate’s special accomplishments（10 points） | |  |
| 5. Suitability as instructor of course（10 points） | |  |
| 6. Appropriateness of company and industry（10 points） | |  |
| 7. Expected opportunities for industry-academia collaboration（10 points） | |  |
| 8. Expected opportunities for assistance in off-campus internships（10 points） | |  |
| 9. Expected opportunities for assistance in off-campus competitions（10分 10 points） | |  |
| **Instructional Unit** | | **Office of Academic Affairs** | |
| **Assessment of Department (Graduate Institute) Chair** | **Signed by Department (Graduate Institute) Chair** | Project-Control Section | Dean of Academic Affairs |
| □Candidate is strongly recommended  □ Candidate is recommended  □ Candidate is not recommended |  |  |  |
| **Signed by College Dean** |
|  |

**Syllabus of Industry Expert Collaboratively Teaching Course for the \_\_\_\_ Semester of the \_\_\_\_ Academic Year**

|  |  |  |
| --- | --- | --- |
| Department (Graduate institute)  offering course |  | |
| Name of collaboratively teaching course |  | |
| Full-time Instructor |  | |
| Industry Expert |  | |
| Number of hours and weeks of collaborative teaching |  | |
| **Course Syllabus**  (State in list format) | Part of course taught by full-time instructor |  |
| Part of course taught by industry expert |  |
| **Expected**  **Instructional**  **Outcomes**  (State in list format) |  | |
| Notes |  | |

Note： Please attach a copy of handout/s or report/s.

**List of Industry Instructors**

**for the \_\_\_\_ Semester of the \_\_\_\_ Academic Year**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Number | Course Name | Course Instructor | Industry Instructor | Number of Instructional Weeks |
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**Summary of Satisfaction Survey Regarding Industry Instructors**

**for the \_\_\_ Academic Year**

* After compiling the results of the student survey, instructional units should place the summary on the front page and archive the surveys for future review. Thank you for your help.

|  |  |
| --- | --- |
| Instructional Unit |  |
| Course Name |  |
| Course Instructor |  |
| Industry Instructor |  |
| Specialization & Qualifications |  |
| Number of Instructional Weeks |  |
| Student Satisfaction Survey Results  （Average score on 5-point scale） |  |
| Suggestions from Instructional Unit |  |
| Notes |  |

**Satisfaction Survey Regarding Industry Expert Collaborative Teaching**

(**To be completed by students**)

Survey number：

|  |
| --- |
| Dear Student,  　To understand how you feel about the teaching of industry experts and to collect data that guide future implementations of the project, we request you to check a box after each question on the survey. The larger the number you check, the more you agree with the statement. On the contrary, the lower the number you check, the less you agree with the statement. We appreciate your help.  Office of Academic Affairs |

**I. Basic information**

1、Date： 　 mm/dd/yyyy

2、Department：

3、Course Name：

4、Time of Class：

5、Gender：□male □female

6、Program：□ 5-year Junior College □ 4-year College □ 2-year College □ Graduate Institute □ Division of Continuing Education □ Other\_\_\_\_\_\_\_\_\_\_\_\_

7. Year：□1st □2nd □3rd □4th □5th

**II. Survey questions**

| Question | Strongly agree | Agree | Neutral | Disagree | Strongly disagree |
| --- | --- | --- | --- | --- | --- |
| 5 | 4 | 3 | 2 | 1 |
| 1.I am satisfied with this course being taught by more than one instructor. | □ | □ | □ | □ | □ |
| 2. I am satisfied with the appropriateness of the content taught by the industry instructor. | □ | □ | □ | □ | □ |
| 3. I am satisfied with the newer concepts and information in the course content. | □ | □ | □ | □ | □ |
| 4. I am satisfied with how prepared the industry instructor is regarding the course content. | □ | □ | □ | □ | □ |
| 5. I am satisfied with the industry instructor being able to share actual practical experience. | □ | □ | □ | □ | □ |
| 6. I am satisfied with the industry instructor being able to share knowledge or insights in a non-structured manner (just verbally and without textbooks or handouts for further review.) | □ | □ | □ | □ | □ |
| 7. I am satisfied that the industry instructor’s practical experience has increased my knowledge about workplace practices. | □ | □ | □ | □ | □ |
| 8. I am satisfied that this course has enhanced my creativity and abilities. | □ | □ | □ | □ | □ |
| 9. I am satisfied that this course has made me more confident in my learning. | □ | □ | □ | □ | □ |
| 10. I am satisfied that I can integrate what I have learned with other knowledge and theories. | □ | □ | □ | □ | □ |
| 11. I am satisfied that the content taught by the industry instructor can help me in my future career. | □ | □ | □ | □ | □ |
| 12. I am satisfied that the industry instructor’s course content has increased specialized knowledge that I will need in my career. | □ | □ | □ | □ | □ |
| 13. I am satisfied that the industry instructor’s course content has increased my confidence in related work. | □ | □ | □ | □ | □ |
| 14. I am satisfied that the industry instructor’s course content has increased my employability. | □ | □ | □ | □ | □ |

**III. Please provide suggestions regarding the industry instructor’s teaching：**

**Satisfaction Survey Regarding Industry Expert Collaborative Teaching** (**To be completed by full-time instructors**)

**Dear Instructor,**

Survey number：

Below is a survey investigating your satisfaction with the University’s Industry Experts Collaboratively Teaching Project. Please check the appropriate boxes in light of your actual participation and teaching. （The larger the number you check on the survey, the more you agree with the statement.）。

Office of Academic Affairs

**I. Basic Information：**

1.Position： □Lecturer □Assistant Professor □Associate Professor □Professor □Other

2.Teaching experience： □less than 3 years　□3-10 years　□10-20 years

□more than 20 years

3. Name of course an industry expert was invited to teach collaboratively：

**II. Survey questions**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Item number | Question | Strongly agree  (5) | Agree  (4) | Neutral  (3) | Disagree  (2) | Strongly disagree  (1) |
| 1 | I understand very well the goals of the Industry Experts Collaboratively Teaching Project. | □ | □ | □ | □ | □ |
| 2 | The goals of the Industry Experts Collaboratively Teaching Project fit my teaching needs. | □ | □ | □ | □ | □ |
| 3 | I am satisfied with the administrative support that the University offers for the Industry Experts Collaboratively Teaching Project. | □ | □ | □ | □ | □ |
| 4 | I am satisfied with the application procedure for the Industry Experts Collaboratively Teaching Project. | □ | □ | □ | □ | □ |
| 5 | I strongly agree that industry expert collaborative teaching can facilitate exchanges between industry and academia. | □ | □ | □ | □ | □ |
| 6 | The classes taught by the industry expert can help students understand the current industry status. | □ | □ | □ | □ | □ |
| 7 | The classes taught by the industry expert can enhance students’ professional abilities. | □ | □ | □ | □ | □ |
| 8 | If the University implements the Dual Instructor Teaching Project again, I am willing to apply again. | □ | □ | □ | □ | □ |
| 9 | I am willing to recommend that my colleagues participate in the Dual Instructor Teaching Project. | □ | □ | □ | □ | □ |
| 10 | As a whole, participating in the Dual Instructor Teaching Project had a positive effect on my teaching. | □ | □ | □ | □ | □ |

|  |  |
| --- | --- |
| ※In the implementation of this Dual Instructor Teaching Project, which are the areas that need most improvement?（Your suggestions are welcome.）  Application procedure：  Request for funds：  Hiring of industry instructors：  Administrative assistance：  Other： | |
| ※Please share substantive results from collaboratively teaching classes with industry experts (such as whether it will actually benefit future teaching, how it helped students, how the two instructors cooperated in teaching, whether there were other collaborations such as students going to companies to do internships, instructors going to companies to learn on-site, etc.)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Industry Experts Collaboratively Teaching Project

for the \_\_\_ Academic Year

**Amendment to Application**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Instructional Unit |  | | | | | | |
| Item to be amended  （please select） | □ Amendment to course | | □addition □cancellation | | | | |
| □ Amendment to number of weeks | | Original number of weeks | |  | Amended number of weeks |  |
| □ The hourly pay is NT$1600（The Ministry of Education subsidizes NT$900. The University provides matching funds of NT$700.）。  ※Calculation for the number of instructional weeks is done on a semester basis. The number of collaboratively teaching weeks must be at least 1/3 (6 weeks). （For year-long courses, applications should be submitted each semester.） | | | | | | |
| Instructional Content | | | | | | | |
| Please indicate the number of industry experts needed. (The academic semester has a total of 18 weeks. The academic year has a total of 36 weeks. Applicants of item 3 should submit an application for each semester.) | | | | | | | |
| Course Name  （Academic semester & number of credits） | Instructors | Number of Instructional Weeks | | Instructional Content | | | |
|  | Full-time instructor |  | |  | | | |
| Industry  Expert 1 |  | |  | | | |
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|  |  | |  | | | |
| Instructors（must sign in person） |  | | | | | | |

**※When adding or cancelling instructional hours (weeks) taught by industry experts, the number of cancelled hours may not exceed 1/8 of the hours originally applied for.**

**※This application for amendment should be approved by each instructional unit (Departmental (Center) Affairs Committee and College Affairs Committee) and then submitted to the Project-Control Section of the Office of Academic Affairs.**