

亞太衛生健康協會會員申請表

Asia Pacific Health Association Membership Application

姓名 Name		出生日期 Date of birth	
性別 Gender		民族 Nationality	
證件類型\號碼 ID type\Number		政治面貌 Political status	
專業類別 Professional category		職稱 Professional title	
職務 Position		E-mail	
手機號 Mobile phone		微信號 Wechat number	
工作單位 Work unit			
通信地址 Mail address			
郵政編碼 Postal Code		聯系電話 Fixed telephone	
本人主要履歷 My main experience			
自何年月至何年月 From what year/month to what year/month	在何地區何單位 In which district and unit		職務 position

<p style="text-align: center;">本人及單位意見 <i>Opinions from myself and the HR department of the company</i></p> <p>我自願加入亞太衛生健康協會會員，認真履行協會及關聯平臺任命職務所賦予的權力和承擔的義務，致力於亞太區域醫療衛生健康事業的交流互通與不斷提高，為亞太衛生健康事業發展貢獻力量。</p> <p><i>I voluntarily join the Asia Pacific Health Association as a member, conscientiously fulfilling the powers and obligations assigned by the association and its affiliated platforms, and committed to the exchange and continuous improvement of medical and health services in the Asia Pacific region, contributing to the development of the Asia Pacific health industry.</i></p> <p>申請人 <i>Applicant:</i> (印章 <i>seal</i>)</p> <p style="text-align: center;">年 月 日</p> <p style="text-align: center;"><i>Specific date:</i></p>	<p style="text-align: center;">協會意見 <i>Opinions of social organizations</i></p> <p>經辦人 <i>Handled by:</i> (印章 <i>seal</i>)</p> <p>會員類別 <i>Membership Category:</i></p> <p>會員號 <i>Member ID:</i></p> <p style="text-align: center;">年 月 日</p> <p style="text-align: center;"><i>Specific date:</i></p>	
<p>個人簡介 <i>Personal detailed introduction</i></p>		