

National Chiayi University Syllabus
Department of _____, Spring/Fall Semester,
Academic Year _____

Course:	Credit:	Hours:
Class:	<input type="checkbox"/> Required, <input type="checkbox"/> Elective	
Instructor:	E-mail:	
Office:	Office Hours:	

I. Course Description:

II. Teaching Objectives:

III. Class Schedule(~day, periods?~?)

Week	Date	Topic/Activity	Reading/Assignment
1			
2			
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IV. Evaluation :

V. References :

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Single space 、 Times New Roman 、 12 pt.