Please indicate from which consulate office (which city) you plan to apply for the visa:

**外国高端人才确认函申请表**

APPLICATION FORM FOR CONFIRMATION LETTER FOR HIGH LEVEL FOREIGN TALENTS

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| 申请编号APPLICATION NO |  Leave for administrative staff. |
| 姓（如护照所示）SURNAME (As inPassport) |  | 名（如护照所示）FIRST AND MIDDLE NAMES (As in Passport) |  | Please provide a high resolution passport photo against white background. |
| 别名或曾用名（英文）OTHER NAME USED |  | 中文姓名CHINESE NAME |  |
| 性别GENDER |  | 出生日期DATE OF BIRTH(yyyy-mm-dd*)* |  |
| 婚姻状况MARITAL STATUS |  | 国籍NATIONALITY |  |
| 出生地 PLACE OF BIRTH(country) |  | 护照类型PASSPORT TYPE |  | 护照号码PASSPORT NUMBER |  |
| 护照签发日期ISSUANCE DATE | - - | 护照有效期至EXPIRATIONDATE(yyyy-mm-dd) | - - | 列出所有曾授予你护照的国家 LIST ALL COUNTRIES THAT EVER ISSUED YOU A PASSPORT |  |
| 列出所有曾使用过的护照号码 LIST ALL PASSPORT NUMBERS THAT YOU EVER HAVE USED |  | 最高学位（学历） HIGHEST ACADEMIC DEGREE |  | 申请人现全职工作单位 APPLICANT FULL-TIME JOB EMPLOYER PRESENTLY | Emeritus Professor – related info may be entered here |
| 申请人现全职工作地点（国家/地区） APPLICANT FULL-TIME JOB LOCATIONPRESENTLY(country/distr ict) |  | 申请人现全职工作岗位 APPLICANT FULL-TIME JOB OCCUPATION PRESENTLY |  | 申请人现全职工作所属行业 APPLICANT FULL-TIME JOBINDUSTRY CATEGORY PRESENTLY |  |
| 申请人现全职工作职务或职称 APPLICANTFULL-TIME JOB TITLE PRESENTLY |  | 申请人电话APPLICANT TELEPHONE NUMBER | - | 申请人电子邮箱 APPLICANT E-MAIL ADDRESS |  |
| 邀请单位名称 NAME OF INVITING UNIT | 北京量子信息科学研究院 | 邀请单位联系人 INVITING UNIT CONTACT PERSON | 朱绮伦 | 邀请单位联系人联系电话 INVITING UNIT CONTACT PERSON TELEPHONE NUMBER | 13521265438 |
| 邀请单位联系人联系邮箱 INVITING UNIT CONTACT PERSONE-MAILADDRESS | zhuql@baqis.ac.c n | 申请人主要突出成就 APPLICANT MAINLY HIGHLIGHTS ACHIEVEMENTS | Please use one or two sentence(s) to summarize your major achievements. |
| 适用外国高端人才具体标准 APPLICABLE STANDARD FOR FOREIGN HIGH-END TALENTS | Leave for administrative staff |

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| 列出曾就读的高等教育学校（含职业教育学校）LIST ALL HIGHER EDUCATIONAL INSTITUTIONS YOU HAVE ATTENTED (INCLUDING VOCATIONAL INSTITUTIONS) |
| 名称NAME | 所在国家LOCATION | 就读时间DATES OF ATTENDANCE | 专业SPECIALITY | 教育类型EDUCATIONAL TYPE | 学位ACADEMIC QUALIFICATION |
|  |  | yyyy-mm toyyyy-mm |  | Undergraduate Course | Bachelor |
|  |  | yyyy-mm toyyyy-mm |  | Graduate Course | Master |
|  |  | yyyy-mm toyyyy-mm |  | Postgraduate Course | Doctor |
| 列出曾工作的单位(近十年内)LIST ALL EMPLOYERS YOU HAVE WORKED FOR（in the last 10 years） |
| 名称NAME | 工作所在国家LOCATION | 起止时间DATES | 工作岗位OCCUPATION | 职务JOB TITLE | 工作任务JOB DESRIPTION |
|  |  | yyyy-mm to yyyy-mm |  |  |  |
|  |  | yyyy-mm to yyyy-mm |  |  |  |
|  |  | yyyy-mm to yyyy-mm |  |  |  |
| 在华紧急联系人EMERGENCY CONTACT PERSON IN CHINA | 朱绮伦 | 与申请人关系RELATIONSHIP TO THE APPLICANT | 工作关系 |
| 联系电话EMERGENCY CONTACT TELEPHONE NUMBER | 13521265438 | 电子邮箱E-MAILADDRES S | zhuql@baqis.ac.cn |
| 您是否由于犯有任何罪行而曾经被逮捕或被判有罪，即使后来得到了赦免或收回等其他类似措施？HAVE YOU EVER BEEN ARRESTED OR CONVICTED FOR ANY OFFENSE OR CRIME, EVEN THOUGH SUBJECT OF A PARDON, AMNESTY OR OTHER SIMILAR LEGAL ACTION? | □是 YES |
| ☑ 否 NO |
| 您是否曾感染过对公共健康有影响的传染病或患过可造成危险的身体疾病或精神病？ | □是 YES |

|  |  |
| --- | --- |
| HAVE YOU EVER BEEN AFFLICTED WITH A COMMUNICABLE DISEASE OF PUBLIC HEALTH SIGNIFICANCE OR A DANGEROUS PHYSICAL OR MENTAL DISORDER? | ☑ 否 NO |
| 您是否曾违反中国法律，被中国政府递解出境？HAVE YOU EVER VIOLATED THE LAW OF CHINA, AND DEPORTED FROM CHINA? | □是 YES |
| ☑ 否 NO |
| 本人郑重承诺，在本国及境外无犯罪记录，来华后，将严格遵守中国法律法规。本申请表上所做之回答均属事实且详尽，所附材料真实、有效，若所提交的内容被发现不实或不详，本人愿意承担法律责任。对所提交的全部申请信息和附件授权可以调查。I SOLEMNLY PROMISE THAT I HAVE NO CRIMINAL RECORD BOTH AT MY HOME COUNTRY AND ABROAD. WHEN I ARRIVE IN CHINA, I WILL STRICTLY ABIDE BY THE CHINESE LAWS. I CERTIFY THAT ALL THE ANSWERS TO THIS APPLICATION AND RELEVANT ATTACHMENTS TO IT ARE TRUE AND COMPLETED. IF THE INFORMATION IS FOUND TO BE UNTRUE OR UNCOMPLETED, I AM AWARE THAT I NEED TO UNDERTAKE CORRESPONDING LEGAL RESPONSIBILITIES.I UNDERSTAND THAT ALL OF THE INFORMATION IN THIS APPLICATION AND DOCUMENTS SUBMITTEDWITH THIS APPLICATION MAY BE CHECKED BY RELEVANT PARTIES. |
| 申请人签名 SIGNATURE OF APPLICANT |  |
| 日期 DATE(yyyy-mm-dd) |  |
| 邀请单位承诺如实向行政机关提交有关材料和反映真实情况，并对申请材料实质内容的真实性负责,承担相关法律责任。 |
| THE INVITING UNIT HEREBY DECLARES THAT ALL THE DOCUMENTS AND INFORMATIONS SUBMITTED TO THE AUTHORITY ARE TRUE,AND SHALL BE RESPONSIBLE TO THE AUTHENTICITY OF THE DOCUMENTS AND UNDERTAKE CORRESPONDING LEGAL RESPONSIBILITIES. |
| 邀请单位公章（Seal of inviting unit）年 月 日YYYY MM DD |  |