

# 哈尔滨师范大学黑龙江省府奖学金招生简章

黑龙江省教育厅委托哈尔滨师范大学招收优秀留学生到我校攻读学士、硕士或博士学位。留学生可选择我校所提供的专业(见附表)进行学习,留学生在华学习期间的费用由黑龙江省财政提供,具体如下:

## 一、 奖学金申请条件

非中国籍公民,且拥有外国国籍满四年以上(含四年)。遵守中国法律法规,遵守学校规章制度,符合中华人民共和国出入境条件,身体健康。申请本科生奖学金、硕士研究生奖学金、博士研究生奖学金的申请人须为非已在华学习的学生(留华毕业生毕业年限须超过一学年),具体学历和年龄要求如下:

**本科生奖学金:**向申请到哈尔滨师范大学攻读学士学位者提供,专业学习期限为4学年。申请人应具有相当于中国高级中学毕业的学历,学习成绩优秀,年龄不超过25周岁。

**硕士研究生奖学金:**向申请到哈尔滨师范大学攻读硕士学位者提供,专业学习期限为2-3学年。申请人应具有学士学位,年龄在35周岁以下,学习成绩优秀,并有两名教授或副教授的推荐信。

**博士研究生奖学金:**向申请到哈尔滨师范大学攻读博士学位者提供,专业学习期限为3学年。申请人应具有硕士学位,年龄在40周岁以下,学习成绩优秀,并有两名教授或副教授的推荐信。

## 二、 奖学金内容

黑龙江省府奖学金将为学生提供学费、住宿费(双人间)、生活费(仅博士生,3500元人民币/月)、综合医疗保险费等。国际旅费自理。奖学金生如要求进行超出学校教学计划的实验或实习,所需费用由本人自理。

## 三、 申请黑龙江省府奖学金者须提交以下材料

申请人必须如实填写和提交以下申请材料(均一式两份)

- 1.《来华留学黑龙江省府奖学金申请表》;
- 2.经公证的最高学历证明和学习成绩单;

3. 申请者为在校生，需提交本人就读学校出具的在学证明。（2.3 所需证明材料非中、英文本的需附经公证的中文或英文的译文）
  4. HSK 证书。申请学士学位须 HSK4 级证书（汉语言文学专业除外），申请硕士、博士学位须 HSK5 级证书。
  5. 申请者须提交来华学习或研修计划（800-1000 字），须用中文或英文书写。
  6. 申请攻读硕士、博士学位的申请者须提交两名教授或副教授的推荐信，用中文或英文书写；
  7. 由中国卫生检疫部门统一印制的《外国人体格检查记录》原件及复印件；
  8. 护照复印件；
- 以上材料请于每年 **5 月 1 日** 前邮寄至哈尔滨师范大学留学生招生办公室，不论录取与否申请材料概不退还。

#### 四、联系方式

地 址：中国黑龙江省哈尔滨市南岗区和兴路 50 号  
哈尔滨师范大学留学生招生办公室

邮 编：150080

电 话：+86-451-88067479/86315015（汉语、英语、俄语）

传 真：+86-451-86305382

E - mail: [ic@hrbnu.edu.cn](mailto:ic@hrbnu.edu.cn)（汉语、英语、俄语）

网 址: [www.ic.hrbnu.edu.cn](http://www.ic.hrbnu.edu.cn)

NO.										

黑龙江省政府奖学金申请表

APPLICATION FORM FOR HEILONGJIANG GOVERNMENT SCHOLARSHIP

请申请人认真阅读本表第四页的填表说明。请用中文或英文填写此表格。请用电脑打印或用蓝色或黑色钢笔认真书写表格内容。请在所选项框内划‘X’表示。不按规定填写的表格将视作无效。

Please read carefully the important notes on the last page before filling out the form. Please complete the form in Chinese or English. If the form is not filled in on PC, please write legibly in black or blue ink. Please indicate with ‘X’ in the blank chosen. Any forms that do not follow the notes will be invalid.

1. 申请人情况/Personal Information:

护照用名/Passport Name:

姓/Family Name: \_\_\_\_\_

名/Given Name: \_\_\_\_\_

国籍/Nationality: \_\_\_\_\_ 护照号码/Passport No.: \_\_\_\_\_

出生日期/Date of Birth: 年/Year \_\_\_\_\_ 月/Month \_\_\_\_\_ 日/Day \_\_\_\_\_

出生地点/Place of Birth: 国家/Country: \_\_\_\_\_ 城市/City: \_\_\_\_\_

男/Male: ☐ 女/Female: ☐ 已婚/Married: ☐ 未婚/Single: ☐ 其它/Other: ☐

母语/Native Language: \_\_\_\_\_ 宗教/Religion: \_\_\_\_\_

当前联系地址/Present Address: \_\_\_\_\_

电话/Tel: \_\_\_\_\_ 传真/Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

永久通信地址/Permanent Address: \_\_\_\_\_



2. 受教育情况/Education Background:

学校 Institutions	在校时间 Years Attended (from/to)	主修专业 Fields of Study	毕业证书及学位证书 Certificates Obtained or To Obtain
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. 工作经历/Employment Record:

工作单位 Employer	起止时间 Time (from/to)	从事工作 Work Engaged	职务及职称 Posts Held
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. 语言能力/Language Proficiency:

a).汉语/Chinese: 很好/Excellent: ☐ 好/Good: ☐ 较好/Fair: ☐ 差/Poor: ☐ 不会/None: ☐

HSK 考试等级或其他类型汉语考试成绩/ Level of HSK test or other certificates which can show your Chinese level:\_\_\_\_\_

b).英语/English: 很好/Excellent: ☐ 好/Good: ☐ 较好/Fair: ☐ 差/Poor: ☐ 不会/None: ☐

我的英语水平可以用英语学习/I can be taught in English: 是/Yes ☐ 否/No ☐

c).其他语言/Other Languages:\_\_\_\_\_

5. 来华学习计划/Proposed Study in China:

a).本科生/Bachelor's Degree Candidate: ☐

硕士研究生/Master's Degree Candidate: ☐

博士研究生/Doctor's Degree Candidate: ☐

b).申请来华学习专业或研究专题/Subject or Field of Study in China:\_\_\_\_\_

c).申请院校/Preferences of Institutions of Higher Education in China:

I. \_\_\_\_\_ II. \_\_\_\_\_ III. \_\_\_\_\_

d).申请专业学习时间/Duration of the Major Study:

自/From: 年/Year\_\_\_\_\_月/Month\_\_\_\_\_至/To: 年/Year\_\_\_\_\_月/Month\_\_\_\_\_

6. 拟在华学习或研究的详细内容(可另附纸)/ Please Describe the Details of your Study or Research Plan in China (an extra paper can be attached if this space is not enough):

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7. 曾发表的主要学术论文、著作及作品/Academic Papers, Writing & Art Works Published:

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8. 申请奖学金类别/Scholarship Applied:

A. 本科生奖学金/ Scholarship for undergraduate: ☐

B. 硕士研究生奖学金/ Scholarship for Master Degree: ☐

C. 博士研究生奖学金/ Scholarship for Doctorate: ☐

9. 推荐您申请黑龙江省政府奖学金的机构或个人/Please Specify the Organization or Person Recommending you for this Scholarship: \_\_\_\_\_

10. 申请人在华事务联系人或机构/The Guarantor Charging Your Case in China:

名称/Name:\_\_\_\_\_ 电话/Tel:\_\_\_\_\_ 传真/Fax:\_\_\_\_\_

地址/Address:\_\_\_\_\_

11. 申请人是否曾在华学习或任职/Have you ever Studied or Worked in China?

是/Yes: ☐ 学习或任职单位/Institution or Employer: \_\_\_\_\_

在华时间/Time in China: 自/From: 年/Year \_\_\_\_\_ 月/Month \_\_\_\_\_ 至/To: 年/Year \_\_\_\_\_ 月/Month \_\_\_\_\_

否/No: ☐

12. 申请人亲属情况/Family Members of the Applicants:

	姓 名 Name	年 龄 Age	职 业 Employment
配偶/Spouse:	_____	_____	_____
父亲/Father :	_____	_____	_____
母亲/Mother:	_____	_____	_____

\* \* \* \* \*

● 所附材料情况 (请在所附附件前划‘X’标明) /Materials Attached (Please Indicate with ‘X’ in the Bracket.):

- ☐ 申请表 (一式两份) / Application Form (in duplicate).
- ☐ 两封推荐信/Two Letters of Recommendation.
- ☐ 有关中国院校接受函或录取通知书/Admission Letter or Admission Notice of Chinese Universities.
- ☐ 本人最后学历成绩单复印件 (须公证, 一式两份) /Transcripts of the Most Advanced Studies (Notarized Photocopy).
- ☐ 本人最后学历证书复印件 (须公证, 一式两份) /Diploma of the Most Advanced Studies (Notarized Photocopy):  
本科/Bachelor's ☐ 硕士/Master's ☐ 博士/Doctor's ☐ 其它/Others ☐
- ☐ 外国人体格检查记录 (复印件) / Foreigner Physical Examination Form (Photocopy).
- ☐ 来华学习计划/ Study Plan in China.
- ☐ 所发表的文章等/ Articles or Papers Written or Published.
- ☐ 美术作品 (本人作品彩照六张)、音乐作品 (本人音乐作品盒式录音带一盘) (只限申请美术和音乐专业的申请人)  
/Examples of Art (6 color pictures) and Music (1 audio tape) Work (Only for the applicants applying for Fine Arts and Music).
- ☐ 其它附件 (请列出)/Other Attachments (List Needed): \_\_\_\_\_

注: 每份申请材料最多不超过20页, 请全部使用A4纸。

Each set of the complete materials should not exceed 20 pages. Please use DIN A4.

无论申请人是否被录取, 上述申请材料恕不退还。

Whether the candidates are accepted or not, all the application materials will not be returned.

● 申请人保证/I Hereby Affirm That:

1. 申请表中所填写的内容和提供的材料真实无误;  
All information and materials given in this form are true and correct.
2. 在华期间, 遵守中国的法律、法规, 不从事任何危害中国社会秩序的、与本人来华学习身份不符合的活动;  
During my stay in China, I shall abide by the laws and decrees of the Chinese government, and will not participate in any activities in China which are deemed to be adverse to the social order of China and are inappropriate to the capacity as a student.
3. 来华后服从HLJPED所安排的就读院校和学习专业, 不得无故要求变更学校和所学专业;  
I will agree to the arrangements of my institution and specialty of study in China made by HLJPED, and will not apply for any changes in these two fields without valid reasons.
4. 在学期间, 遵守学校的校纪、校规, 全力投入学习和研究工作。尊重学校的教学安排;  
During my study in China, I shall abide the rules and regulations of the host university, and concentrate on my studies and researches, and follow the teaching programs arranged by the university.
5. 按照规定参加黑龙江省奖学金年度评审;  
I shall go through the procedures of the Annual Review of Heilongjiang Government Scholarship Status as required.
6. 按规定期限修完学业, 按期回国, 不无故在华滞留;  
I shall return to my home country as soon as I complete my scheduled program in China, and will not extend my stay without valid reasons.
7. 如违反上述保证而受到中国法律、法规或校纪、校规的惩处, 我愿意接受黑龙江省教育厅中止或取消奖学金及其它相应的处罚。  
If I am judged by the Chinese laws and decrees and the rules and regulations of the university as having violated any of the above, I will not lodge any appeal against the decision of HLJPED on suspending, or withdrawing my scholarship, or other penalties.

申请人签字/Signature of the Applicant: \_\_\_\_\_ 日期/Date: \_\_\_\_\_

(无此签名, 申请无效/The application is invalid without the applicant's signature)

填表说明（每一项数字与申请表中每一项序号相对应）：

**GUIDELINES FOR FILLING IN THIS FORM (NUMBERS REFERRING TO THE VARIOUS BLOCKS):**

1. 本项所有内容申请人必须如实填写。  
Personal information about the applicant must be filled in truly and correctly.
2. 请列出申请人已经完成或即将完成的各级教育，包括中学、职业教育及高等教育各项。请随材料附上经公证的最高级教育的学历证明、毕业证书或学位证书的原件复印件和英文翻译件（均一式两份）。  
Please provide the following information for all completed secondary, vocational, technical, undergraduate or post graduate training and qualifications. Any incomplete courses should also be listed. One notarized copy of your official transcripts certificates and notarized copies of English translations of your highest education must be included with each application form.
3. 请列出申请人曾经从事和现在从事的工作。  
Please clarify your work experiences and you current post.
4. 本项将表明申请人的语言情况，对申请人来华后的课程安排及授课语言非常重要。请随材料附上有关证明材料。  
Please state your knowledge of languages, especially Chinese and English. If you have passed a language test, please include a copy of the results in your application materials. This is very important because it will decide your teaching language in China.
5. 请申请人按本项提示选择来华后的学习计划，HLJPED有权作相应调整。  
The applicant will choose the detailed information concerning his study in China according to the clues given in this cell. HLJPED is entitled to make any necessary adjustment according to the applicant's preferences.
  - a. 请选择你申请来华学习的类别。  
Please choose what level of study you want to be engaged in in China.
  - b. 请详细写出你申请来华学习的专业或从事研究的专题。  
Please specify your subject or field of study in China.
  - c. 请从接受黑龙江省政府奖学金留学生的高等学校中选择三所并填写在本栏中，你的选择仅作为HLJPED安排学校时的参考。如果你已经被某所黑龙江省高校录取，请附上该校的《录取通知书》或接受函的复印件。  
Please choose three preferences of Chinese institutions among the Chinese universities which can accepted Heilongjiang Government Scholarship students and list them in the blanks here. The final arrangement of institution is subject to the adjustment of HLJPED with your choices as references. If you have been accepted by a Heilongjiang university, please attach the copy of their admission notice to your application materials.
  - d. 请标明你所申请的来华学习时间。  
Duration of the major study applied in China.
6. 请认真填写此项，它对于学校确定申请人的学习专业及授课教师非常重要。请说明你从事研究的题目或基本内容，亦可以列出你希望的一些课程。可另附纸。  
Please illustrate the subject of your research or the main content of your study, you can also give some courses you want to attend in China. It is crucial for the university to decide your major and arrange the professor for you.
7. 请列出申请人曾经发表的或曾写过的论文、著作、作品。  
Please list here your academic papers, writing and artwork published or written, if any.
8. 黑龙江省政府奖学金分三类，请选择你申请的一类。  
Choose the Scholarship you applied in the three offered by Heilongjiang Government.
9. 你的推荐人和推荐机构。  
The person or organization that recommend you for this scholarship.
10. 在华联系人或联系机构，关于申请人在华的有关事务，我们将与其联系。  
The guarantors charging your case in China, we will contact them for your case when necessary.
11. 如果你曾在中国学习或工作过，请告知你在华的学习院校或工作单位。  
If you had ever been to China for study or work, please specify your institution, employer and time in China.
12. 申请人亲属的基本情况。  
General information about the applicant's family members.

# 外国人体格检查表

## FOREIGNER PHYSICAL EXAMINATION FORM

姓名 Name		性别 Sex	<input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female	出生日期 Birthday		照片 (加盖检查单位印章)  Photo (Stamped Official Stamp)																																										
现在通讯地址 Present mailing address																																																
国籍或地区 Nationality (or Area)		出生地 Birth place		血型 Blood type																																												
<p>过去是否患有下列疾病：(每项后面请回答“否”或“是”) Have you ever had any of the following diseases? (Each item must be answered “Yes” or “No”)</p> <table border="0"> <tr> <td>班疹 伤寒</td> <td>Typhus fever</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> <td>菌 痢</td> <td>Bacillary dysentery</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>小儿麻痹症</td> <td>Poliomyelitis</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> <td>布氏杆菌病</td> <td>Brucellosis</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>白 喉</td> <td>Diphtheria</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> <td>病毒性肝炎</td> <td>Viral hepatitis</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>猩 红 热</td> <td>Scarlet fever</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> <td>产褥期链球</td> <td>Puerperal streptococcus infection</td> <td></td> </tr> <tr> <td>回 归 热</td> <td>Relapsing fever</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> <td>菌 感 染</td> <td></td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>伤寒和付伤寒</td> <td colspan="2">Typhoid and paratyphoid fever</td> <td colspan="2"></td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>流行性脑脊髓膜炎</td> <td colspan="2">Epidemic cerebrospinal meningitis</td> <td colspan="2"></td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> </table>							班疹 伤寒	Typhus fever	<input type="checkbox"/> No <input type="checkbox"/> Yes	菌 痢	Bacillary dysentery	<input type="checkbox"/> No <input type="checkbox"/> Yes	小儿麻痹症	Poliomyelitis	<input type="checkbox"/> No <input type="checkbox"/> Yes	布氏杆菌病	Brucellosis	<input type="checkbox"/> No <input type="checkbox"/> Yes	白 喉	Diphtheria	<input type="checkbox"/> No <input type="checkbox"/> Yes	病毒性肝炎	Viral hepatitis	<input type="checkbox"/> No <input type="checkbox"/> Yes	猩 红 热	Scarlet fever	<input type="checkbox"/> No <input type="checkbox"/> Yes	产褥期链球	Puerperal streptococcus infection		回 归 热	Relapsing fever	<input type="checkbox"/> No <input type="checkbox"/> Yes	菌 感 染		<input type="checkbox"/> No <input type="checkbox"/> Yes	伤寒和付伤寒	Typhoid and paratyphoid fever				<input type="checkbox"/> No <input type="checkbox"/> Yes	流行性脑脊髓膜炎	Epidemic cerebrospinal meningitis				<input type="checkbox"/> No <input type="checkbox"/> Yes
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流行性脑脊髓膜炎	Epidemic cerebrospinal meningitis				<input type="checkbox"/> No <input type="checkbox"/> Yes																																											
<p>是否患有下列危及公共秩序和安全的病症：(每项后面请回答“否”或“是”) Do you have any of the following diseases or disorders endangering the public order and security? (Each item must be answered “Yes” or “No”)</p> <table border="0"> <tr> <td>毒物瘾</td> <td>Toxicomania</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>精神错乱</td> <td>Mental confusion</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>精神病 Psychosis:</td> <td>躁狂型 Manic psychosis</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td></td> <td>妄想型 Paranoid psychosis</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td></td> <td>幻觉型 Hallucinatory</td> <td><input type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> </table>							毒物瘾	Toxicomania	<input type="checkbox"/> No <input type="checkbox"/> Yes	精神错乱	Mental confusion	<input type="checkbox"/> No <input type="checkbox"/> Yes	精神病 Psychosis:	躁狂型 Manic psychosis	<input type="checkbox"/> No <input type="checkbox"/> Yes		妄想型 Paranoid psychosis	<input type="checkbox"/> No <input type="checkbox"/> Yes		幻觉型 Hallucinatory	<input type="checkbox"/> No <input type="checkbox"/> Yes																											
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身高 Height	厘米 CM	体重 Weight	公斤 Kg	血压 Blood pressure	毫米汞柱 mmHg																																											
发育情况 Development		营养情况 Nourishment		颈部 Neck																																												
视力 左 L _____ Vision 右 R _____		矫正视力 左 L _____ Corrected vision 右 R _____		眼 Eyes																																												
辨色力 Colour sense		皮肤 Skin		淋巴结 Lymph nodes																																												
耳 Ears		鼻 Nose		扁桃体 Tonsils																																												
心 Heart		肺 Lungs		腹部 Abdomen																																												

脊柱 Spine		四肢 Extremities		神经系统 Nervous system																	
其他所见 Other abnormal findings																					
胸部 X 线 检查结果 (附检查报告单) Chest X-ray exam (attached chest X-ray report)			心电图 ECC																		
化验室检查 (包括艾滋病、 梅毒等血清学检查) Laboratory exam (attached test report of AIDS, Syphilis etc)																					
<div>未发现患有下列检疫传染病和危害公共健康的疾病： None of the following diseases of disorders found during the present examination.</div> <table><tr><td>霍乱</td><td>Cholera</td><td>性病</td><td>Venereal Disease</td></tr><tr><td>黄热病</td><td>Yellow fever</td><td>肺结核</td><td>Lung tuberculosis</td></tr><tr><td>鼠疫</td><td>Plague</td><td>艾滋病</td><td>AIDS</td></tr><tr><td>麻风</td><td>Leprosy</td><td>精神病</td><td>Psychosis</td></tr></table>						霍乱	Cholera	性病	Venereal Disease	黄热病	Yellow fever	肺结核	Lung tuberculosis	鼠疫	Plague	艾滋病	AIDS	麻风	Leprosy	精神病	Psychosis
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医师签字 Signature of physician		日期 Date																			