

NATIONAL TAIWAN UNIVERSITY

Performance Report for the Incentives for Newly Hired Exceptional Talent

[Amended in March 2023]

Final processing unit		Preliminary processing unit	
Name		Job title	
Incentive period	From ____/____/____ to ____/____/____ (yyyy/mm/dd)	Incentive amount	NT\$ _____ (optional)

Please describe your concrete research outcomes during the incentive period: (Type in Times New Roman, 12 pts, 1-page limit)

- 1. Concrete outcomes, significant contributions, or specific benefits brought to the University, the academic/scientific field, industry-academia collaboration, or interdisciplinary research that are made possible by the incentives: (Describe the differences before and after incentives were granted both quantitatively and qualitatively.)**
- 2. Description of research performance (such as research outcomes, awards, or accolades):**

Please list research grants issued by the National Science and Technology Council (NSTC), the Council of Agriculture, etc. **during the incentive period** which were granted **on the basis of having passed a review by NSTC, a peer review, or a competition with other researchers, and for which the applicant serves as the principal investigator (not including co-investigators):**

Note: Use the following codes in the "Status" column: 1. Pending 2. Approved 3. Rejected. The competent academic program shall check the appropriate box (A: eligible; B: ineligible) in the "Review by academic program" column.

Status	Project No.	Project title	Project duration	Source(s) of funding	Review by academic program
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3					<input type="checkbox"/> A <input type="checkbox"/> B
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3					<input type="checkbox"/> A <input type="checkbox"/> B
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3					<input type="checkbox"/> A <input type="checkbox"/> B

Signature and seal of the recipient: _____ Date: _____

This case was reviewed and passed by the Faculty Evaluation Committee of the department (division, graduate institute, office, center, or degree program) on ____/____/____ (yyyy/mm/dd).

Seal of the unit head: _____