**國立陽明交通大學**

**著作彙編之學位論文資訊及彙編學術著作之共同作者貢獻聲明書**

基於學術研究誠信，「著作彙編之學位論文」學生（以下稱聲明人）茲聲明彙編學術著作之相關資訊及共同作者貢獻度。**一、聲明人相關資訊**

|  |
| --- |
| （一）學生姓名： |
| （二）就讀系所： |
| （三）學位論文名稱：（請自行填入學位論文標題） |

□ 本人學位論文為著作彙編之學位論文。

□ 本人學位論文非為著作彙編，免填「二、彙編著作之相關資訊」。

**二、彙編著作之相關資訊**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 論文正文章節 | **各篇彙編著作之資訊** | | | | | | |
|  | **第一部分：學位論文中所收錄之期刊或研討會著作的情況** | | | | | | |
| 期刊或研討會名稱 | | | （請自行填入期刊名稱或研討會名稱） | | | |
| 期刊或研討會著作標題 | | | （請自行填入著作標題） | | | |
| 共同作者排序及姓名（請標明通訊作者）  第一作者：  第二作者：  第三作者：  第四作者：  （若超過四人，請自行增列共同作者資訊） | | | | | | |
| 期刊/研討會著作之出版/發表情況：（請勾選及填寫下列選項）  □ 已刊登/發表： 年 月 日。  連結網址：https://doi.org/xxxxxxxxxxxxxx  □ 已接受刊登/發表（請附上接受證明）： 年 月 日。 | | | | | | |
| **第二部分：「著作彙編之學位論文」作者（學生）就此期刊/研討會著作之貢獻度聲明** | | | | | | |
| 貢獻說明 | |  | | | | |
| 貢獻程度於整篇學術論文之百分比 | | （請自行估計貢獻度百分比） | | | | |
|  | **第三部分：共同作者分工事項之說明** | | | | | | |
| **論文發表之所屬單位** | **姓名** | **分工事項（得加註貢獻度百分比）** | | **本著作是否曾納入下述共同作者的學位論文或教師送審著作** | **簽名註二** | **日期** |
|  |  |  | |  |  |  |
|  |  |  | |  |  |  |
|  |  |  | |  |  |  |
| 備註：   1. 若您的「著作彙編之學位論文」是由一篇以上之期刊或研討會著作彙編而成，請自行增列第一部分至第三部分的表格，並詳實登錄「論文正文章節」與「各篇彙編著作之資訊」等欄位。 2. 第三部分：共同作者貢獻度之說明，因故無法取得共同作者之簽名，請於簽名欄位釋明之。 | | | | | | | |

以上聲明均為屬實，如有不實，聲明人願意負相關法律與學術倫理責任。

聲明人簽章：

指導教授簽章：

系所主管或系所單位核章：

日期：中華民國 年 月 日

**National Yang Ming Chiao Tung University  
Information and Co-author Contribution Statement**

**of Thesis by Publication**

To maintain academic and research integrity, the candidate of TBP (hereinafter referred to as the declarant) hereby declares the relevant information of the TBP and the contribution of co-authors.  
**1、The Declarant’s Profile**

|  |
| --- |
| （1）Name: |
| （2）Department/Program: |
| （3）The thesis title：(Fill in here) |

□ My thesis is in the form of a series of publications.

□ My thesis is not in the form of a series of publications, and there’s no need for me to fill out the information of a TBP below.

**2、The Relevant Information of My TBP**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Thesis Body Section** | **The Information of Each Publication** | | | | | | |
|  | **Part 1: The Information of the Journal or Seminar Papers Included in the Thesis** | | | | | | |
| The name of the journal or seminar | | | (fill in here) | | | |
| The title of journal or seminar paper | | | (fill in here) | | | |
| The ranking and names of co-authors (please indicate the corresponding author)  The first author:  The second author:  The third author:  The fourth author:  (If there are more than four authors, please add other co-authors.) | | | | | | |
| The publishing status of journal/seminar papers: (Please tick the boxes below and fill in the required information):  □ Published on： (mm-dd-yyyy).  Website：https://doi.org/xxxxxxxxxxxxxx  □ Accepted for publication (please provide proof )： (mm-dd-yyyy). | | | | | | |
| **Part 2: The Declarant’s Statement of Contribution in the Journal/Seminar Papers** | | | | | | |
| **Details of Contribution** | |  | | | | |
| **The percentage of contribution** | | (Please calculate by yourself.) | | | | |
|  | **Part 3: Explanation of Co-authors’ Division of Labor** | | | | | | |
| **The unit to which the co-author belongs** | **Name** | **Division of labor (the percentage of contribution must be indicated)** | | **Has this paper been included in the dissertation or faculty promotion work by the following co-authors** | **Signaturenote 2** | **Date** |
|  |  |  | |  |  |  |
|  |  |  | |  |  |  |
|  |  |  | |  |  |  |
| Notes: 1. If your TBP includes more than one journal or seminar papers, please add forms for Part 1 to Part 3, and fill in the details of the fields below ‘Thesis Body Section’ and ‘The Information of Each Publication’. 2. For Part 3: Explanation of Co-authors’ Division of Labor, if the signature of the co-author cannot be obtained for some reason, please explain it in the signature field. | | | | | | | |

The above statements are all true. If there is any falsehood, the declarant is willing to bear the relevant legal and academic ethical responsibilities.  
The declarant’s signature :  
The advisor’s signature:   
Seal of (the director of) the department:

Date: (mm-dd-yyyy).