I-SHOU UNIVERSITY

Application Form for e-Documents Services

Applying Unit		Date	
Applicant **(Faculty/Staff ID No.)**	( )	**Mobile/Ext.**	
Job Title		**Email**	

Please tick the appropriate box based on the service you need:

1. Change the dispatcher

2. Set or maintain the process of handling electronic documents

☐ **1. Change the dispatcher**

Reason	Change of the Dispatcher						
☐ **Dispatcher**	☐ **First**	**Original**		**New**		**Faculty/Staff ID No.**	
	☐ **Second**						

☐ **2. Set or maintain the process of handling electronic documents (change the process or the ratified result or set the right to search previous official documents)**

Description	
The document is currently handled by	
Subject of the Document	
Document No.	**Received/Issued Document No.**
Type of Official Documents	☐ **1. Documents from outside the University** ☐ **4. Meeting notice** ☐ **7. Petition** ☐ **2. Official letter** ☐ **5. Announcement** ☐ **8. Internal meeting notice** ☐ **3. Letter** ☐ **6. Order** ☐ **9. Internal Announcement**

＊The signature of the person who ratified the result is required if you want to **change the ratified result**.

Applicant	Department Chair (Section Chief)	First-level Head of the Unit	Ratified by

Ref. No.:

Application Result			
Staffer-in-charge		**Date of Completion**	
Head of the Unit-in-charge		**Date of Reply**	