

國立交通大學 學年第 學期兼任教師參加勞健保申請表

National Chiao Tung University

Labor and Health Insurance Enrollment Application Form for Adjunct Faculty Members  
Academic Year Semester

一、基本資料 Personal Information					
姓名 Name		身分證字號 (外籍請填居留證號碼) Identity number or Alien Resident Certificate number (foreigners)		出生日期 Date of birth	
人事代號 Personnel code		兼任職稱 Adjunct Position title		電話 Phone number	
身心障礙人士 (具有減免身分請檢附相關資料) Handicapped (Please attach supporting documents for those who are qualified for reductions and exemptions)		<input type="checkbox"/> 是 YES  <input type="checkbox"/> 否 NO	地址 Residential Address		
聘書字號、聘期 Appointment Letter number and Appointment period	聘書字號： 聘期：年 月 日至 年 月 日止 Appointment Letter number: Appointment period: From / / to / / (DD/MM/YYYY)				
二、參加保險資料 Insurance Information					
參加險種 Type of insurance	<input type="checkbox"/> 參加勞保 Labor Insurance  <input type="checkbox"/> 參加健保 Health Insurance		眷屬是否加保? Enrollment application for dependents ?	<input type="checkbox"/> 是 YES  <input type="checkbox"/> 否 NO	
已領取勞工保險老年給付或已自軍公保退休者 Have received labor pension or have retired from military or civil servant insurance				<input type="checkbox"/> 是 YES  <input type="checkbox"/> 否 NO	

<p>已有相關退休金制度保障（如現職軍公教人員）、已領取退休金（俸）及具有專職(請提供其他單位開立之在職證明)</p> <p>Have been insured through relevant retirement pension systems (i.e., current military, civil servant, and teaching personnel) or have received retirement pension (remuneration) or have a full-time occupation (please provide proof of employment from other units)</p>	<p><input type="checkbox"/> 是 YES</p> <p><input type="checkbox"/> 否 NO</p>
<p>勞退自提 Labor pension self-contribution</p>	<p><input type="checkbox"/> 本人願意每月自薪資中提繳6%退休金至勞保局個人退休金專戶。 (外籍人士為離職儲金)</p> <p>I am willing to contribute 6% of monthly salary for pension toward the individual labor pension account provided by the Bureau of Labor Insurance (Unavailable for foreigners; Foreigners shall choose “pay-as-you-go” contribution benefit system )</p> <p><input type="checkbox"/> 本人不願意提繳。I am not willing to contribute.</p>
<p>加保期間 Insurance enrollment</p>	<p>加保日： 年 月 日（詳說明事項第二點，以學校行事曆之開學日為原則）</p> <p>Date of enrollment (DD/MM/YYYY)( Normally is the first day of school at each semester specified in the school calendar, please refer to <b>Item 2 in the description below</b>)</p> <p>退保日： 年 月 日（詳說明事項第二點，以學校行事曆學期考試期間結束日為原則）</p> <p>Date of surrender(DD/MM/YYYY)( Normally is the last day of term exams at each semester specified in the school calendar, please refer to <b>Item 2 in the description below</b>)</p> <p>備註：依聘期每學期為6個月，兼任教師加保期間為學校行事曆之開學日至學期考試期間結束日，該期間之雇主負擔由學校支付，如欲於聘期內額外加保須自負個人負擔及雇主負擔金額，並於加保當日依人事室開立收據金額全額繳清。</p> <p><b>Note:</b> The appointment period is 6 months for each semester; the insurance enrollment of adjunct faculty members is from the first day of school to the last day of term exams at each semester based on the school calendar. During the above mentioned period, the employers’ financial load is supported by the school. Personal and employer’ s financial loads must all be self-supported if additional insurance coverage is desired during the employment period; additionally, the full amount must be invoiced at the personnel office and paid on the day the additional coverage is purchased.</p>
<p>三、課程資料 Course Information</p>	
<p>兼任教師自行填寫 For adjunct faculty member</p>	<p>開課單位填寫 For course unit</p>

開課單位 Course unit	課程名稱 Course title	每週時數 Weekly hours	支給鐘點費 金額 Hourly fee	<b>經費來源</b> (請確認經費來源是否為 <b>學校人事費</b> ? 勾選 <b>是</b> 則不需填寫, 勾選 <b>否</b> 請填寫經費來源。) <b>Source of Funding</b> (Please confirm whether the source of funding is from the <b>school's personnel expenses</b> . Please specify the source of funding if you select <b>No.</b> )
				<input type="checkbox"/> 是 YES <input type="checkbox"/> 否 NO, 經費來源 source:
				<input type="checkbox"/> 是 YES <input type="checkbox"/> 否 NO, 經費來源 source:
				<input type="checkbox"/> 是 YES <input type="checkbox"/> 否 NO, 經費來源 source:
(本人已確認填表內容及第二頁說明事項之規定, 並同意配合之) (I have confirmed the table contents and the descriptions specified on page 2 and have agreed to conform) <b>申請人 簽名:</b> Applicant signature		<b>承辦人簽章 Case officer signature :</b> <b>分機 Extension :</b>		
		<b>計畫主持人核章:</b> Project director		<b>開課單位主管核章:</b> Course unit supervisor

人事室:

Personnel Office

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**【第 1 次加保本人身分證影本浮貼處】**

(Please attach a copy of your personal identification document in the space below if applying for insurance enrollment for the first time)

**◎兼任教師參加勞健保說明事項：**

Descriptions: Adjunct faculty members applying for labor and health insurance:

一、加保資格：本校聘任兼任教師未具公教人員保險或軍人保險被保險人資格者。

Qualification for insurance enrollment: Adjunct faculty members appointed by NCTU who are not qualified for the insurance for civil servants, academia personnel, or military personnel.

二、加保時間：聘期為每學期開始日至結束日，加保期間為學校行事曆規定之開學日（加保申請表攸關人員保險權益請親送人事室勞健保承辦處，如於開學日前送件者，以開學日為加保日，開學日後送件者，以收件日為加保日，不予以追溯回開學日，）至學期考試期間之結束日，學期考試結束日則統一退保，下一學期再獲聘任者，人事室不主動續保，請重新送件申請加保。

Period of insurance coverage: The appointment period of adjunct faculty is from the first day to the last day of each semester; However, the insurance enrollment is from the first day of school at each semester based on the school calendar (the insurance enrollment application form is related to the insurance interests of personnel; please personally deliver the application to the labor and health insurance registry of the personnel office; the validity of the insurance begins on the first day of school for applications delivered before the first day of school; whereas applications that are delivered after the first day of school are effective on the day they are received and coverage will not be traced back to the first day of school) until the last day of term

exams. Insurance enrollment plans are collectively surrendered on the last day of term exams. Adjunct faculty members who are hired next semester must reapply for insurance enrollment. The personnel office will not initiate insurance renewal.

### 三、注意事項：Notices

- (一) 第一次在本校加保請附身分證正反面影本（外籍人士請附護照、居留證及工作許可證等文件影本）。

For those who first-time enroll insurance at our school, please provide copies of your personal identification document(s) (front and back); foreign employees please attach copies of your passport, ARC, and work permit).

- (二) 個人負擔保費自行一次繳納一學期數額至本校出納組或由聘任單位造冊扣繳，經費來源為學校人事費者由課務組統一造冊扣繳。

The personal burden insurance fees should be paid by the insurant at the Division of Cashiers of NCTU (single payment for each semester) or be registered and withheld by the employing unit; if the funding source is our school's personnel expenses, the personal burden insurance fees collectively registered and withheld by our Division of Curriculum.

- (三) 聘用期間中途離職、薪資調整等異動時，請主動提早至人事室辦理退保手續或異動申請，如未即時辦理退保手續或未申請異動調整者，將繼續扣繳保費，因此而致本校溢繳勞保費及公(自)提退休金，則由申請人全額繳交。

When changes such as resignation or salary adjustments are made during the appointment period, please apply for a surrender or change in advance; failure to do so will result in continued insurance billing and the overpaid company and self burden insurance fees and pension contributions for which the applicant are fully liable.

- (四) 勞保部分如已領取勞工保險老年給付或已自軍公保退休者，僅辦理參加職業災害保險；勞退部分基於不重複保障原則，已有相關退休金制度保障（如現職軍公教人員）、已領取退休金（俸）及具有專職者，本校得不予提繳勞工退休金，具上列身份者請註明於下表以利勞保及勞退作業。如具上列身分但隱匿未告知，導致本校溢繳勞保、勞退費用，溢繳費用由申請人全額負擔。

For labor insurance, applicants who have already received labor pension or have retired from military or civil servant insurance may only apply for occupational hazard insurance. Labor pension is based primarily on no overlapping insurance policies. We do not permit contributions to labor pension plans from those who have been insured by relevant retirement pension systems (i.e., current military, civil servant, and

teaching personnel) or have received retirement pension (remuneration) and have full-time employment. Applicants who fit these descriptions please specify in the following form to facilitate labor insurance and pension operating processes.

**Applicants who fail to inform the above statuses that result in the school overpaying labor insurance or labor pension fees will be charged the full amount.**

- (五) 依「勞工退休金條例」規定，按月提繳退休金至勞保局個人退休金專戶，本校提撥 6%，個人請自由選擇不提繳或提繳 1-6%，實際自薪資中提繳金額，依「勞工退休金月提繳工資分級表」標準，年滿 60 歲時，由勞工本人自行向勞保局申請個人專戶之退休金。勞工退休金相關內容，請逕至勞工保險局(<http://www.bli.gov.tw>)網站查閱。

According to Labor Pension Act regulations, NCTU contribute 6% of your monthly salary to the individual labor pension account provided by the Bureau of Labor Insurance. Individuals may choose not to contribute or to contribute 1 - 6%. Actual contributed amounts from salaries are based on the Table of Monthly Contributions for Labor Pension. At the age of 60, employees must independently apply for pensions from individual accounts from the Bureau of Labor Insurance. Information related to labor pension can be found on the official Web site of the Bureau of Labor Insurance (<http://www.bli.gov.tw>).