國立臺灣科技大學(以下簡稱臺科大) 新進人員體格檢查同意書

NTUST New Employees Physical Examination Consent Form

本人瞭解臺科大依「職業安全衛生法第 20 條」規定，應於到職日完成繳交新進人員**一般體格檢查**或**特殊體格檢查報告**，並同意將本人所繳交之個人資料、法定及非法定體檢資料，提供本校環安室保存及辦理健康管理業務之用。所繳交資料如有不實，或未能於規定期限完成繳送，除有不可抗力之正當理由外，願意自負法律責任及接受本校相關規定之處理。若檢查結果有校園防治傳染病安全理由，願遵照醫療機構體檢建議，做進一步檢查或就醫，並配合後續追蹤事宜。**當您於頁末簽名處簽署本同意書時，表示您已閱讀、瞭解並同意接受本同意書之所有內容。**

I understand that according to the Article 20 of the Occupational Safety and Health Act, I should complete the submission of the general physical examination or special physical examination report at first day of registration, and agree to provide personal data, statutory and non-legal medical examination data to the Office of Environmental Safety for preservation and health management. Without any proper justification, If the submitted report is false, or not handed on time,I am willing to accept the administrative sanction and legal liability. If the examination results concern the control of communicable diseases on campus, I agree to adhere to the recommendations of the medical institution to do further examinations or treatments, and I will completely cooperate in subsequent monitoring. **Your signature below indicates that you have read, understood and accepted the contents set forth in this agreement.**

※ 「非繼續性之臨時性或短期性工作，且其工作期間在六個月以內」者可免實施。
"Temporary or short-term work that is not continuous, and the working period is within six months" can be excluded from implementation.

★ 請以正楷填寫下列資訊 Please fill in a form neatly ★

在本校是否將從事「特別危害健康作業」? Will I be engaged in Special Hazardous Working in this school? ☐是 YES，類別 Item:_____(請進行該項特殊體格檢查) ☐否 NO	(詳見網頁連結 scan the QR code below to read the information in detail.) https://reurl.cc/9rg1Ma

到職日 Due date：___/___/___	
姓名 Name：_____	**單位分機 Unit extension**：_____
服務單位 Department：_____	**手機 cell phone number**：_____
職稱 Position：_____	**出生日期 Date of birth(西元)** ____/____/____
身分證字號(或護照) ID or passport number：_____	
電子郵件 E-mail：_____	

用人單位主管資訊 Unit supervisor related information

- 姓名 Name: _____
- 單位分機 Unit extension：_____
- 電子郵件 E-mail：_____

本次新聘如有下列身分轉換視為在職員工，非新進人員；☐本人為新進人員

1☐專任教師改聘為專案教師 2☐專任助理或博士後研究員改聘為專案教師
3☐專案教師改聘為專任教師 4☐專任助理或博士後研究員改聘為約用人員
5☐約用人員改聘為專任助理或博士後研究員 6☐其他(請備註說明)_____
轉換身分(到職)日期:聘僱到期日期(無則免填):

立同意書人 Name：_____(簽章)
立同意書日期 Date:____年(Year)____月(Month)____日(Day)