

國立清華大學「新進人員體格檢查」聲明書

_____ (以下稱本人) 於_____年_____月_____日受僱於國立清華大學(下稱僱用人)_____ (單位)任職，惟按照職業安全衛生法第 20 條及勞工健康保護規則第 14 條規定，受僱人均有接受體格檢查之義務。

茲保證將盡速主動繳交本人之體格檢查報告至衛保組留存備查，如未盡速主動繳交體格檢查報告，以致違反相關法規而須受行政裁罰時，本人願自負相關法律責任。

本人已充分明白應接受新進人員體格檢查之義務，特以此書面為憑。

此致

國立清華大學 衛保組

聲 明 人： (簽名)

員工編號：

身分證字號：

連絡電話：

電子郵件：

中華民國： 年 月 日

補繳日期： 年 月 日

聲 明 人： (簽名)

Declaration for NTHU New Employee Pre-Employment Physical Exam

I, _____ (Full Name) “the employee”, am employed by _____ (Department) of National Tsing Hua University (“The Employer”) on _____ (Date) _____ (Month) _____ (Year). It is understood that it is the employee’s obligation to take a Pre-Employment Physical Exam prior to the time of employment in accordance with the Article 20 of the *Occupation Safety and Health Act* as well as the Article 14 of *Labor Health and Protection Regulation*.

I confirm that I will submit the report of my Pre-Employment Physical Exam to Division of Health Service as soon as possible. Should I delay submitting the report of my Pre-Employment Physical Exam to Division of Health Service resulting in receiving penalties from any organizations, I am fully responsible for all consequences of the violation of the above-mentioned rules and regulations.

I have read and understood my responsibility and the consequences regarding the Pre-Employment Physical Exam.

(Signature) _____

Print Name

(Staff No) _____

(Passport No.) _____

(Mobile) _____

(Email) _____

(Date) _____

(Signature) _____

Print Name

Report Submitted Date