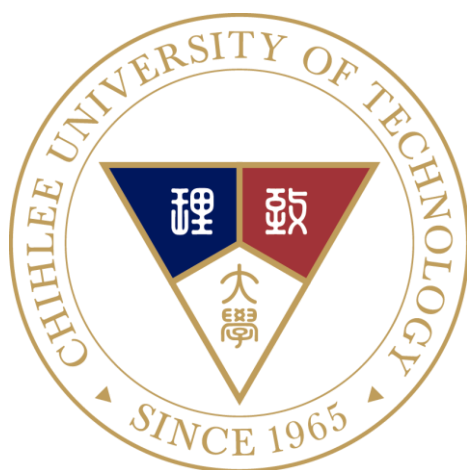


致理科技大學

Chihlee University of Technology



2017 外國短期交換學生簡章

(春季)

Application for Exchange Students

校址： 22050
中華民國台灣新北市板橋區文化路1段313號
Address： 313, Section 1, Wunhua Road, Banciao District,
New Taipei City 22050, Taiwan (R.O.C.)
網址/ Website： <http://www.chihlee.edu.tw>
服務電話/ TEL： 886-2-22576167 ext.1315
傳真電話/ FAX： 886-2-22588518

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● 申請資格

- 一、 具外國國籍且未曾具有中華民國國籍，於申請時並不具僑生資格者，得依本規定申請入學。
- 二、 具外國國籍且符合下列規定，於申請時並已連續居留海外六年以上者，亦得依本規定申請入學：
 1. 申請時兼具中華民國國籍者，應自始未曾在臺設有戶籍。
 2. 申請前曾兼具中華民國國籍，於申請時已不具中華民國國籍者，應自內政部許可喪失中華民國國籍之日起至申請時已滿八年。
 3. 前二項均未曾以僑生身分在臺就學，且未於當學年度接受海外聯合招生委員會分發。
 4. 本項所定六年、八年，以擬入學當學期起始日期(二月一日或八月一日)為終日計算之。
 5. 本項所稱海外，指大陸地區、香港及澳門以外之國家或地區；所稱連續居留，指交換學生每曆年在國內停留期間未逾一百二十日。但符合下列情形之一且具相關證明文件者，不在此限；其在國內停留期間，不併入海外居留期間計算：
 - A. 就讀僑務主管機關舉辦之海外青年技術訓練班或教育部認定之技術訓練專班。
 - B. 就讀教育部核准得招收外國學生之各大專校院華語文中心，合計未滿二年。
 - C. 交換學生，其交換期間合計未滿二年。
 - D. 經中央目的事業主管機關許可來臺實習，實習期間合計未滿二年。
- 三、 依教育合作協議，由外國政府、機構或學校遴薦來臺就學之外國國民，其自始未曾在臺設有戶籍者，經主管教育行政機關核准，得不受前二項規定之限制。
- 四、 具外國國籍並兼具中華民國國籍，且於教育部「外國學生來臺就學辦法」100年2月1日修正施行前已提出申請喪失中華民國國籍者，得依原規定申請入學，不受第二項規定之限制。
- 五、 學歷資格：
 1. 二技部學士班：經教育部認可之國外專科以上學校畢業者。
 2. 四技部學士班：經教育部認可之國外公立或已立案之私立高中、職或中五學制以上學校畢業，並符合下列各該系特別要求申請資格者。
 3. 碩士班：經教育部認可之國內外公私立大學或獨立學院畢業者。

附註：1. 申請資格依本校交換學生申請入學辦法辦理。
2. 本校課程以中文授課為主，申請人須具備基本中文聽說讀寫能力。

● Eligibility

1. An individual of foreign nationality, who has never held nationality status from the Republic of China (R.O.C.) and who does not possess an overseas Chinese student status at the time of their application, is qualified to apply for admission under these regulations.
2. An individual of foreign nationality, pursuant to the following requirements and who has resided overseas continuously for no less than 6 years is also qualified to apply

for admission under this regulation.

- (i) An individual who also is a national of the R.O.C., but does not hold or has had a household registration in Taiwan.
 - (ii) An individual of foreign nationality who was also a national of the R.O.C. but has no R.O.C. nationality at the time of their application shall have an annulled status regarding their R.O.C. nationality for no less than 8 years after an annulment of R.O.C. nationality by the Ministry of the Interior.
 - (iii) Regarding individuals mentioned in the preceding 2 subparagraphs, they must not have studied in Taiwan as an overseas Chinese student nor received placement permission during the same academic year of the application by the University Entrance Committee for Overseas Chinese Students.
 - (iv) The six year/eight year calculation period as prescribed in Paragraph 2 shall be calculated from the starting date of the semester (February 1st or August 1st) as the designated due date for the time of study.
 - (v) The term “overseas” as prescribed in Paragraph 2 is limited to countries or regions other than Mainland China, Hong Kong and Macau; the term “reside overseas continuously” means that an individual may stay in Taiwan for no more than a total of 120 days per calendar year. The only exceptions to this method of calculation are for those who fulfill one of the following requirements with written supported proof; and the said domestic length of stay shall be excluded from the overseas length of residency:
 - (1) Attended overseas youth training courses organized by the Overseas Compatriot Affairs Council or technical training classes accredited by the Ministry of Education (MOE);
 - (2) Attended a Mandarin Chinese language center at a university/college of which foreign student recruitment is approved by the MOE, and to which the total length of stay is less than 2 years;
 - (3) Exchange students, whose length of total exchange is less than 2 years; or
 - (4) An Internship in Taiwan which has been approved by an authorized central government agency, to which the total length of stay is less than 2 years.
3. According to the Education Cooperation Framework Agreement, a foreign national selected by a foreign government, organization, or school, and does not hold a household registration from the time of their birth is not subject to the limitations as prescribed in the preceding 2 paragraphs after receiving the approval from the authorized educational government agencies.
 4. An individual, who has both foreign and R.O.C. nationalities and has applied for an annulment of their R.O.C. nationality before February 1, 2011, the effective date of the amendment to Regulations Regarding International Students Undertaking Studies in Taiwan, is qualified to apply for admission as an exchange student and will not be subject to the limitation as prescribed in Paragraph 2.

5. Degree Qualifications :

- (i) 2 Year Undergraduate Degree Programs:
Applicants to any 2 year bachelor degree programs must hold an associate bachelor degree diploma recognized by the R.O.C.
- (ii) 4 Year Undergraduate Degree Programs:
Applicants to any 4 year bachelor degree programs must hold a valid senior high school diploma (including Form 5) recognized by the R.O.C.
- (iii) Master Degree Program:
Applicants to the master degree program must hold a valid bachelor degree recognized by the R.O.C.

※Applicants must:

- (1) Satisfy all applicable requirements stated in the Chihlee University of Technology (CIT) Regulations for Exchange Student Admissions.
- (2) Most lectures are conducted in Mandarin. Applicants must possess basic Chinese reading, writing, speaking, and listening skills.

● 招生系所 Departments

編號 (No.)	學系 (Department)	備註(Remarks)
1	國際貿易系 (Department of International Trade)	課程以中文授課為主，申請人須具備基本中文聽說讀寫能力。 Most lectures are conducted in Mandarin. Applicants must possess basic Chinese reading, writing, speaking, and listening skills.
2	企業管理系 (Department of Business Administration)	
3	財務金融系 (Department of Finance)	
4	會計資訊系 (Department of Accounting Information)	
5	行銷與流通管理系 (Department of Marketing and Logistics Management)	
6	資訊管理系 (Department of Information Management)	
7	商務科技管理系 (Department of Commerce Technology and Management)	

8	多媒體設計系 (Department of Multimedia Design)	<p>1. 課程以中文授課為主，申請人須具備基本中文聽說讀寫能力。</p> <p>2. 視力正常無色盲。</p> <p>1. Most lectures are conducted in Mandarin. Applicants must possess basic Chinese reading, writing, speaking, and listening skills.</p> <p>2. Normal vision. No color blindness.</p>
9	應用英語系 (Department of Applied English)	課程以中文授課為主，申請人須具備基本中文聽說讀寫能力。
10	應用日語系 (Department of Applied Japanese)	Most lectures are conducted in Mandarin. Applicants must possess basic Chinese reading, writing, speaking, and listening skills.
11	休閒遊憩管理系 (Department of Leisure and Recreation Management)	

● **修業年限**

依據本校學則規定，交換學生修習四技大學部者，修業年限以 6 個月為原則，修業年限最多以 1 年為原則。

● **Length of Study**

According to CIT regulations on academic programs, the length of study for students who pursue a Exchange course is 6 months; max length of study is 1 years.

● **申請期限**

自即日起至 2016 年 11 月 30 日止受理申請，將填妥之入學申請表及相關資料以郵戳為憑，寄至本校招生委員會，逾期不受理。

● **Application Deadline**

Applicants should submit their application forms and all related materials to the Admissions Committee before NOV. 30, 2016. Applications received after the deadline will not be processed.

● **申請應繳交文件**

- 一、入學申請表一式二份（附貼 6 個月內 2 吋半身脫帽近照）。
- 二、最高學歷或同等學力證明文件及成績單（中、英文以外之語文，應附中文或英文譯本）：
 1. 大陸地區學歷：應依大陸地區學歷採認辦法規定辦理。
 2. 香港或澳門學歷：應依香港、澳門學歷檢覈及採認辦法規定辦理。
 3. 其他地區學歷：
 - (1) 海外臺灣學校及大陸地區臺商學校之學歷同我國同級學校學歷。
 - (2) 前二目以外之國外地區學歷，應依大學辦理國外學歷採認辦法規定辦理。但設校或分校於大陸地區之外國學校學歷，應經大陸地區公證處公證，並經行政院設立或指定之機構或委託之民間團體驗證。
- 三、最近 3 個月內之健康證明書（包括人類免疫缺乏病毒有關檢查）。
- 四、足夠在臺就學之財力證明，或政府、大專校院或民間機構提供全額獎助學金之證明。
- 五、簡要中文或英文自傳及讀書計畫。
- 六、切結書。
- 七、護照影本（有姓名及國籍之頁面）。
- 八、中文能力程度證明（「華語文能力測驗」《TOCFL》）。

CEFR	TOCFL	報名考試	通過分數
C2	精通級 Level 6	流利精通級 Band C	61
C1	流利級 Level 5		50
B2	高階級 Level 4	高階進階級 Band B	61
B1	進階級 Level 3		46
A2	基礎級 Level 2	入門基礎級 Band A	60
A1	入門級 Level 1		41

- 九、中、英文推薦書（請儘可能提供）。

● **Application Documents Required**

1. Two copies of the completed application form with 2 recent (6 months) passport-style photographs.
2. One photocopy of the applicant’s highest education diploma and one original official transcript of the highest education diploma notarized and stamped by the foreign representative office of the R.O.C. (if written in a language other than Chinese and English, these should be translated into Chinese or English and notarized.)
 - (i) Academic credentials from Mainland China: The Regulations Governing the Accreditation of Schools in Mainland China shall apply.
 - (ii) Academic credentials from Hong Kong or Macao: Academic Credential Verification and Accreditation Methods adopted in Hong Kong and Macao shall apply.
 - (iii) Academic credentials from other areas:
 - (1) Academic credentials earned at overseas Taiwan schools or Taiwan schools in Mainland China shall be regarded as the same as those at domestic schools with equivalent levels.
 - (2) Academic credentials referred to the preceding 2 Items shall be subject to the Regulations Regarding the Assessment and Recognition of Foreign Academic Credentials for Institutions of Higher Education. However, academic credentials earned from institutes or branches established in Mainland China by foreign schools shall require public notarization in Mainland China and be verified and examined by an institute established or appointed by, or through a private agency commissioned by the Executive Yuan.
3. Health certificate of the recent 3 months (including related HIV tests).
4. Financial proof that shows financial sustainability for study in Taiwan, or proof of full scholarship provided by a government agency, university, college, or private organization.
5. A brief autobiography and study plan in Chinese or English.
6. Declaration.
7. Photocopy of passport (including pages confirming name and nationality).
8. Certificate of Chinese language proficiency. (Test of Chinese as a Foreign Language **【TOCFL】**) .

CEFR	TOCFL	Level	Score
C2	Level 6	Band C	61
C1	Level 5		50
B2	Level 4	Band B	61
B1	Level 3		46
A2	Level 2	Band A	60
A1	Level 1		41

9. Letters of recommendation in Chinese and English. (Please provide, if possible)

- **錄取**

2016 年 12 月 30 日前郵寄錄取通知予申請人，並可於本校網頁查詢 (<http://www.chihlee.edu.tw>)。

- **Admissions Announcement**

The admission results will be sent to individual applicants by mail before DEC. 30, 2016. Results are also accessible on-line at the school's website: <http://www.chihlee.edu.tw>.

- **報到**

錄取生依錄取通知之規定日期到校報到，報到時繳交學歷（力）證明正本。逾期未報到者，即以自願放棄入學資格論，其名額依次遞補。

- **Registration**

Accepted students should register on the date appointed or his/her qualification will be canceled. The original copy of diploma should be submitted upon registration. Vacancies shall be filled from among qualified applicants.

附件一

申請注意事項

Application Instructions

1. 申請人須以打字或正楷詳細逐項填寫一式兩份。

To the applicant: Read carefully and complete in duplicate, type or print.

2. 申請人須通曉中文，對中華文化有興趣且品行優良，經本校核准入學之學生。

Applicants must have a reasonable command of the Chinese language and show a genuine interest in Chinese culture.

3. 申請來校留學之交換學生，應於 2016 年 11 月 30 日前附下列文件向本校招生委員會提出申請，逾期不予受理。註冊時，新生應檢附已投保自入境當日起至少六個月效期之醫療及傷害保險或全民健康保險證明文件：

(1)入學申請表一式二份（附貼 6 個月內 2 吋半身脫帽近照）。(2)最高學歷或同等學力證明文件影本 1 份及成績單正本 1 份（中、英文以外之語文，應附中文或英文譯本）。(3)最近 3 個月內之健康證明書（包括人類免疫缺乏病毒有關檢查）。(4)足夠在臺就學之財力證明，或政府、大專校院或民間機構提供全額獎助學金之證明。(5)簡要中文或英文自傳及讀書計畫。(6)切結書。(7)護照影本（有姓名及國籍之頁面）。(8)中文能力程度證明（如：「華語文能力測驗」《TOCFL》）。(9)中、英文推薦書（請儘可能提供）。

Foreign students applying to Chihlee University of Technology shall submit the following documents to the Admission Committee prior to NOV. 30, 2016. Applications received after the deadline will not be accepted. At registration, exchange students shall present proof of a medical and injury insurance policy which is valid for at least 6 months, starting from the date of entry into Taiwan. Current student shall present written proof that they have joined Taiwan's National Health Insurance Plan.

- (1) Two copies of completed application form with 2 recent (6 months) passport-style photographs.
- (2) One photocopy of the applicant's highest education diploma and one original official transcript of the highest education diploma notarized and stamped by the foreign representative office of the R.O.C. (if written in a language other than Chinese and English, these should be translated into Chinese or English and notarized.)
- (3) Health certificate of the recent 3 months (including related HIV tests).
- (4) Financial proof that shows financial sustainability for study in Taiwan, or proof of full scholarship provided by a government agency, university, college, or private organization.
- (5) A brief autobiography and study plan in Chinese or English.
- (6) Declaration.
- (7) Photocopy of passport (including pages confirming name and nationality).
- (8) Certificate of Chinese language proficiency (Test of Chinese as a Foreign Language 【TOCFL】).
- (9) Letters of recommendation in Chinese and English. (Please provide, if possible)

附件二 致理科技大學交換學生入學申請表
Application for Exchange Student Admissions

Admissions Committee, Chihlee University of Technology
313, Section 1, Wunhua Road, Banciao District,
New Taipei City 22050, Taiwan (R.O.C.)
TEL : +886-2-22576167 ext. 1315 FAX : +886-2-22588518
<http://www.chihlee.edu.tw> Email: i206@mail.chihlee.edu.tw

此處貼最近 6 個月內 2 吋半身相片。
Attach a 2-inch bust photograph taken in the last 6 months here.

請以中文打字或正楷逐項填寫/Please type or print clearly in Chinese

申請人姓名 Applicant's Name	中文 In Chinese	出生日期 Date of Birth	
	英文 In English	性別 Sex	<input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female
住址 Home Address		電話 Telephone	
現在通訊處 Mailing Address		電子住址 Email	
出生地點 Place of Birth		國籍 Nationality	護照號碼 Passport No.
監護人 Guardian	中文姓名 Full Name in Chinese	英文姓名 Full Name in English	
	出生地點 Place of Birth	出生日期 Date of Birth	
在台聯絡人 (無則免填) Contact Person in Taiwan (optional)	中文姓名 Full Name in Chinese	英文姓名 Full Name in English	
	住址 Home Address	與申請人關係 Relationship	
			電話 Telephone

教育背景/Education Background

學程 Degree	學校名稱 Name of Institution	學校所在地 City and Country	主修學門 Major	副修學門 Minor	就學期間 Duration of Study	學位/證書 Degree/Diploma /Certificate	取得學位日期 Date of Degree Granted
高級中學 Senior High School							
大學/學院 University/College							

擬申請就讀之系(所)及學位/Intended Degree of Study

系(所) Department/ Graduate School	
修業期間 Length of Study	<input type="checkbox"/> 六個月 6 months

中文語言能力/Chinese Language Ability

學習中文幾年? How many years have you formally studied Chinese?	
學習中文環境(高中、大學、語文機構)? Where did you learn Chinese (high school, college, language institute)?	
您是否參加過中文語文能力測驗? Have you taken any test of the Chinese language?	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No
	何種測驗 What kind of the test
	分數 Score

中文能力自我評估 Self Evaluation of Chinese Language Ability				
聽 Listening	<input type="checkbox"/> 優 Excellent	<input type="checkbox"/> 佳 Good	<input type="checkbox"/> 尚可 Average	<input type="checkbox"/> 差 Poor
說 Speaking	<input type="checkbox"/> 優 Excellent	<input type="checkbox"/> 佳 Good	<input type="checkbox"/> 尚可 Average	<input type="checkbox"/> 差 Poor
讀 Reading	<input type="checkbox"/> 優 Excellent	<input type="checkbox"/> 佳 Good	<input type="checkbox"/> 尚可 Average	<input type="checkbox"/> 差 Poor
寫 Writing	<input type="checkbox"/> 優 Excellent	<input type="checkbox"/> 佳 Good	<input type="checkbox"/> 尚可 Average	<input type="checkbox"/> 差 Poor

財力支援狀況：在本校求學期間費用來源？

Financial Support: What is your major financial resource while you study at Chihlee University of Technology?

<input type="checkbox"/> 個人儲蓄 _____ Personal Savings (金額 Amount of Dollars) USD.	<input type="checkbox"/> 父母援助 _____ Parent Support (金額 Amount of Dollars)
<input type="checkbox"/> 獎助金 _____ Scholarship (來源及金額 Sources & Amount of Dollars)	<input type="checkbox"/> 其他 _____ Others (來源及金額 Source & Amount of Dollars)

獎學金：是否申請本校獎學金？

CIT Scholarship: Do you need to apply for Chihlee University of Technology Scholarship?

<input type="checkbox"/> 是 Yes	<input type="checkbox"/> 否 No
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備註：獎學金之申請及核發僅適用於第1學年。獎學金申請人於第2學年須重新提出申請。

The duration of CIT scholarship covers the first academic year. All applicants shall reapply from the second academic year.

繳交資料紀錄表(申請人務必就已繳交資料，在下面表格之繳交註記欄內打✓)

Please tick the items that you have submitted.

項次 Item	繳交資料項目	份數	註記✓
1	入學申請表一式二份(附貼6個月內2吋半身脫帽近照)。 Two copies of application form. (A 2-inch photo taken in the last 6 months must be attached to the form.)	1	
2	經我國駐外館處驗證通過之最高學歷證明文件影本1份及成績單正本1份(中、英文以外之語文，應附中文或英文譯本)。 One photocopy of the applicant's highest education diploma and one original official transcript of the highest education diploma notarized and stamped by the foreign representative office of the R.O.C. (if written in a language other than Chinese and English, these should be translated into Chinese or English and notarized.)	各1份	
3	最近3個月內之健康證明書(包括人類免疫缺乏病毒有關檢查)。 A health certificate valid within the last 3 months including HIV test.	1	
4	足夠在臺就學之財力證明，或政府、大專校院或民間機構提供全額獎助學金之證明。 Financial proof that shows financial sustainability for study in Taiwan, or proof of full scholarship provided by a government agency, university, college, or private organization.	1	
5	自傳及讀書計畫。 Autobiography and Study Plan.	1	
6	具結書。 Declaration.	1	
7	護照影本(具姓名及國籍之頁面)。 One photocopy of the passport page bearing the name and nationality of the holder.	1	
8	中文能力程度證明(「華語文能力測驗」《TOCFL》)。 Certificate of Chinese Proficiency. (Test of Chinese as a Foreign Language 【TOCFL】)	1	
9	中、英文推薦書(請儘可能提供)。 Letter of Recommendation in English or Chinese. (Please provide, if possible.)		

以上資料確由本人填寫，並經詳細檢查，保證正確無誤。

I have reviewed carefully the above information and hereby guarantee its correctness.

申請人簽名/Applicant's Signature _____ 日期/Date _____

.....

系/所主任審查意見 (申請人免填)

Opinion of Referees (This portion is filled out by the Department/ Graduate School Head)

同意 錄取學生_____為： 短期交換學生

不同意 錄取學生_____，不錄取原因請勾選：

1. 審查成績未達入學標準 2. 語言能力不佳 3. 其他:_____

系/所主任簽章： _____

中華民國 _____ 年 _____ 月 _____ 日

附件三

財力資助證明
Affidavit of Financial Support

資助者姓名： _____

Name of Sponsor: _____

地址： _____

Address _____

與申請人的關係： _____

Relationship to the Applicant: _____

茲保證申請人 _____ 在致理科技大學就讀期間所需之學費與生活費由本人完全負責。

I hereby assume the whole responsibility of providing all the tuition fee and living expenses of the applicant named _____ during his/her study period at Chihlee University of Technology.

資助者簽名 Signature of Sponsor : _____

日期 Date : _____

注意：若為他人資助財力，請繳交本財力資助證明，並由財力資助者簽名。

If you will be sponsored by others, please submit this Affidavit of Financial Support signed by your financial sponsor.

附件五

切結書 Declaration

一、本人保證：

- (一) 未具僑生身分，且不具中華民國國籍。
- (二) 未曾在過去六年內擁有中華民國國籍。
- (三) 未曾以僑生身分申請本校或其他大專校院。
- (四) 須未曾在中華民國完成申請就學學程或遭任何大專校院退學。

1. I certify:

- (1) I am neither an overseas Chinese nor a citizen of the R.O.C.
- (2) I have not possessed a citizenship of the R.O.C. within the past six years.
- (3) I have never applied for admission to Chihlee University of Technology or other colleges/universities in the R.O.C. under the status of an overseas Chinese.
- (4) I have never completed any application for admission to a school in the R.O.C. nor have I been expelled from a college or university in the R.O.C.

二、本人保證所提供之所有相關資料(包括學歷、護照及其他相關文件之正本及其影本)為合法有效之文件。所提供之最高學歷畢業證書在畢業學校所在地國家均為合法有效取得畢業資格，且所持有之證件相當於中華民國國內各級合法學校授予之相當學位。

2. All the documents provided (including diploma, passport, and originals or copies of related documents) are valid. The diploma presented is valid and has been awarded legally in the country where I graduated. My diploma is equivalent to that which is awarded by accredited schools in the R.O.C.

三、本人上述所陳之任一事項，同意授權貴校查證，如有不實或不符規定等情事，本人同意貴校即取消入學資格或註銷學籍，絕無異議。如在貴校畢業後始被發覺，本人同意貴校取消本人畢業資格。

3. I agree to authorize your school to check on all the statements mentioned above. If any statement is found to be forged or falsified, my admission to Chihlee University of Technology will be canceled, and my student status will be revoked. If the fraud is found after graduation, the degrees conferred will be annulled and their eligibility for graduation will be nullified as well.

申請人簽名 Applicant's Signature

申請日期 Date of Application

附件六

健康檢查證明應檢查項目表
Items Required For Health Certificate

請勾選類別: Course applied: 大學部 Undergraduate 轉學生 Transfer student 外籍生、僑生 Overseas (Chinese) student 碩士班 Master 交換學生 Exchange student
為協助學子能平安健康在校就讀，您同意本校應教學需要、輔導、醫療或法律規定而須提供健康檢查之資料予相關單位知悉之作法，同意 Yes，簽名 _____ 不同意 No，簽名 _____
For student safety do you agree to let the school to provide the necessary health examination information for the purpose of medical counseling or legal requirements to relevant offices.



居留或定居健康檢查項目表
Health Certificate for Residence Application

(醫院名稱、地址、電話、傳真)
(Hospital's Name, Address, Tel, Fax)

檢查日期 / Date of Examination
YYYY / MM / DD

基本資料 / Basic Data

姓名： Name	性別： <input type="checkbox"/> 男 / M <input type="checkbox"/> 女 / F Sex	照片 / Photo
身份證字號： ID No.	護照號碼： Passport No.	
出生年月日： Date of Birth	國籍： Nationality	
年齡： Age	聯絡電話： Phone No.	

實驗室檢查 / Laboratory Examinations

A. 胸部 X 光肺結核檢查 / Chest X-ray for Tuberculosis :

X 光發現 / Findings : _____

判定 / Result :

- 合格 / Passed 疑似肺結核 / TB suspect 無法確認診斷 / Pending 不合格 / Failed
 孕婦或 12 歲以下兒童免驗 / Not required for pregnant women or children under 12 years of age

B. 腸內寄生蟲糞便檢查 / Stool Examination for Parasites :

- 陽性，種名 / Positive, Species _____ 陰性 / Negative
 其他可不予治療之腸內寄生蟲 / Other parasites that do not require treatment _____
 來自附錄三之國家/地區者免驗 / Not required for applicants from countries/areas listed in Appendix 3

C. 梅毒血清檢查 / Serological Tests for Syphilis :

檢驗 / Tests :

- a. RPR VDRL
 陽性 / Positive，效價 / Titers _____ 陰性 / Negative，效價 / Titers _____
b. TPHA TPPA FTA-abs TPLA EIA CIA
 陽性 / Positive，效價 / Titers _____ 陰性 / Negative，效價 / Titers _____
c. other _____ 陽性 / Positive，效價 / Titers _____
 陰性 / Negative，效價 / Titers _____

判定 / Result : 合格 / Passed 不合格 / Failed

15 歲以下兒童免驗 / Not required for children under 15 years of age

D. 麻疹及德國麻疹之抗體陽性檢查報告或預防接種證明 / Proof of Positive Measles and Rubella Antibody or Measles and Rubella Vaccination Certificates :

a. 抗體檢查 / Antibody Tests

麻疹抗體 / Measles Antibody 陽性 / Positive 陰性 / Negative 未確定 / Equivocal

- 德國麻疹抗體 / Rubella Antibody 陽性 / Positive 陰性 / Negative 未確定 / Equivocal
- b. 預防接種證明 / Vaccination Certificates (證明應包含接種日期、接種院所及疫苗批號；接種日期與出國日期應至少間隔兩週 / The certificate should include the date of vaccination, the name of administering hospital or clinic and the batch no. of vaccine; the date of vaccination should be at least two weeks prior to traveling overseas.)
- 麻疹預防接種證明 / Measles Vaccination Certificate
- 德國麻疹預防接種證明 / Rubella Vaccination Certificate
- c. 有接種禁忌，暫不適宜預防接種 / Having contraindications, not suitable for vaccination

漢生病檢查 / Examinations for Hansen's Disease

全身皮膚視診結果 / Skin Examination

- 正常 / Normal
- 異常 / Abnormal : 非漢生病 / Not related to Hansen's disease : _____
- 疑似漢生病須進一步檢查 / Hansen's disease suspect who needs further examinations
- a. 病理切片 / Skin Biopsy : _____
- b. 皮膚抹片 / Skin Smear : 陽性 / Positive 陰性 / Negative
- c. 皮膚病灶合併感覺喪失或神經腫大 / Skin lesions combined with sensory loss or enlargement of peripheral nerves : 有 / Yes 無 / No
- 判定 / Result :
- 合格 / Passed 須進一步檢查 / Needs further examinations 不合格 / Failed
- 來自附錄四之國家/地區者免驗 / Not required for applicants from countries/areas listed in Appendix 4

健康檢查總結果 / The final result of health examination :

- 合格 / Passed 須進一步檢查 / Need further examinations 不合格 / Failed

負責醫檢師簽章 / Signature of Chief Medical Technologist : _____

負責醫師簽章 / Signature of Chief Physician : _____

醫院負責人簽章 / Signature of Superintendent : _____

日期 / Date : YYYY / MM / DD

備註 / Note : 本證明三個月內有效。 / The certificate is valid for three months.

附錄一 愛滋篩檢與治療費用通知書

(請健檢醫院將此通知書併同健康檢查證明發給受檢者)

- 一、中華民國政府已修改法規，取消非本國籍人類免疫缺乏病毒(HIV)感染者之入境、停留及居留限制，也取消此項健康檢查項目。
- 二、由於非本國籍人士在中華民國治療 HIV 感染之費用，中華民國政府不提供補助，每年治療費用約為新臺幣三十萬元(約美金一萬元)，建議非本國籍人士先於母國接受 HIV 篩檢，了解自身健康狀況；如為 HIV 感染者，建議留在母國接受治療。欲來中華民國工作者，請先行購買醫療保險，以免造成個人財務負擔。
- 三、外籍人士進入中華民國後，可自行至醫院進行 HIV 篩檢，了解自身感染狀況，傳染病諮詢電話為0800-001922。

Appendix 1 Notice for HIV Screening and Treatment Costs

(Health examination hospitals shall issue this notice and health certificate to the examinee)

1. The Government of Republic of China (Taiwan) has revised its laws to lift restrictions on entry, stay and residence of non-ROC nationals infected with human immunodeficiency virus (HIV) in addition to removing this item from health examination.
2. The Government of Republic of China (Taiwan) does not offer subsidies to non-ROC nationals infected with HIV infection for treatment in Taiwan. The annual treatment costs for HIV is NTD\$300,000 (approximately USD\$10,000). It is strongly advised that non-ROC nationals to undergo HIV screening in their homeland prior to visiting Taiwan in order to understand their own health conditions. Persons infected with HIV are strongly advised to stay in their homeland for treatment. Persons intending to work in Taiwan are advised to purchase medical health insurance in advance to avoid financial burdens.
3. Upon entry into the Republic of China (Taiwan), foreigners may undergo HIV screening at a hospital to determine their infection status. The consultation hotline for infectious diseases is 0800-001922.

Phụ lục 1 Giấy thông báo chi phí xét nghiệm và điều trị HIV

(Đề nghị bệnh viện khi cấp Báo cáo khám sức khỏe thì cấp kèm Giấy thông báo này)

1. Chính phủ Đài Loan đã sửa đổi pháp lệnh, hủy bỏ quy định hạn chế nhập cảnh, tạm trú và cư trú đối với người nước ngoài bị Hội chứng suy giảm miễn dịch mắc phải (HIV), và cũng hủy bỏ hạng mục xét nghiệm này trong quy định khám sức khỏe.
2. Do Chính phủ Đài Loan không trợ cấp chi phí điều trị HIV tại Đài Loan cho người nước ngoài, mà chi phí điều trị mỗi năm khoảng 300 ngàn Đài tệ (khoảng 10 ngàn Đô la Mỹ), nên kiến nghị người nước ngoài, trước khi đến Đài Loan hãy tiến hành xét nghiệm HIV ở nước mình để nắm bắt tình hình sức khỏe của bản thân; nếu bị nhiễm HIV, kiến nghị hãy ở lại nước mình để điều trị. Đối với người dự định đến Đài Loan làm việc, kiến nghị hãy mua Bảo hiểm Sức khỏe trước, nhằm tránh gánh nặng tài chính cho bản thân.

3. Người nước ngoài sau khi đến Đài Loan có thể tự đến bệnh viện xét nghiệm HIV để nắm bắt tình hình nhiễm bệnh của mình, số điện thoại tư vấn bệnh truyền nhiễm tại địa bàn Đài Loan là: 0800-001922.

ภาคผนวก 1 ใบแจ้งค่าใช้จ่ายในการตรวจและรักษาโรคเอดส์

(ให้โรงพยาบาลที่รับการตรวจแนบใบแจ้งนี้พร้อมกับใบตรวจสุขภาพให้กับเจ้าตัว)

1. รัฐบาลไต้หวันได้ยกเลิกคำสั่งการห้ามชาวต่างชาติที่ติดโรคเอดส์ (HIV) เข้าประเทศหยุดแหวะและอยู่อาศัยในไต้หวัน รวมทั้งการตรวจสุขภาพในรายการนี้ด้วย
2. เนื่องจากรัฐบาลไต้หวันไม่ออกค่าใช้จ่ายในการตรวจและรักษาโรคเอดส์ให้กับบุคคลที่ไม่ใช่สัญชาติไต้หวัน ค่ารักษาพยาบาลโรคเอดส์ตกประมาณปีละ NT\$ 300,000 (หรือประมาณ US\$ 10,000) จึงขอแนะนำชาวต่างชาติให้ตรวจโรคเอดส์ (HIV) ในประเทศของตนก่อนเดินทางมาไต้หวัน หากป่วยเป็นโรคเอดส์ให้รับการรักษาในประเทศของตนเสียก่อน ผู้ที่ประสงค์จะมาทำงานในไต้หวันให้ซื้อประกันการรักษาพยาบาลล่วงหน้า เพื่อป้องกันภาวะที่อาจเกิดขึ้นในภายหลัง
3. ชาวต่างชาติเมื่อเดินทางเข้ามาไต้หวันสามารถขอตรวจโรคเอดส์ (HIV) จากโรงพยาบาลได้ด้วยตนเอง เพื่อรับรู้สภาพร่างกายตนเอง หรือติดต่อสอบถามได้ที่ศูนย์ให้คำปรึกษาโรคติดต่อ 0800-001922

Lampiran 1 Surat Pemberitahuan Seleksi AIDS dan Biaya Pengobatan

(Mohon rumah sakit yang mengadakan pemeriksaan menyampaikan surat pemberitahuan ini beserta dengan surat keterangan pemeriksaan kesehatan kepada orang yang melakukan pemeriksaan)

1. Pemerintah Taiwan telah mengubah peraturan , dimana telah membatalkan non warga negara Taiwan yang terjangkit virus (HIV) masuk ke negara ini , menetap dalam jangka waktu pendek atau menetap dalam jangka waktu yang lama yang dibatasi waktunya dan juga telah membatalkan item ini dari pemeriksaan kesehatan .
2. Mengenai biaya pengobatan dari non warga negara Taiwan yang terjangkit virus (HIV) di Taiwan tidak ditanggung oleh pemerintah Taiwan lagi , pemerintah Taiwan tidak akan memberikan subsidi , setiap tahun biaya pengobatan kira-kira sebesar tiga ratus ribu NT\$ (kira-kira sepuluh ribu US \$) , sarankan sebelum non warga negara Taiwan datang ke Taiwan , terlebih dahulu mengadakan pemeriksaan HIV di negara asal , dan untuk mengetahui kondisi kesehatan badan sendiri ; bila telah terjangkit HIV , sarankan mengadakan pengobatan di negara asal terlebih dahulu . Bagi yang hendak bekerja di Taiwan mohon terlebih dahulu membeli asuransi pengobatan , demi untuk menghindari terjadinya beban keuangan secara pribadi .
3. Setelah pendatang asing masuk ke Taiwan , dapat melakukan pemeriksaan seleksi HIV ke rumah sakit dengan sendiri , demi untuk lebih jelas tentang kondisi terjangkit virus ini , boleh telpon ke nomor telepon konseling penyakit menular di wilayah Taiwan adalah : 0800-001922 .

附錄二 辦理居留或定居健康檢查補充說明事項

Appendix 2 Additional instructions of health examination for residence application

- 一、6 歲以下兒童免辦理健康檢查，但須檢具預防接種證明備查(年滿 1 歲以上者，至少接種 1 劑麻疹、德國麻疹疫苗)。

Children under 6 years of age are exempt from health examination, but the certificate of vaccination is necessary. (Child age one and above should get at least one dose of measles and rubella vaccines).

- 二、懷孕婦女及 12 歲以下兒童免驗胸部 X 光檢查；懷孕婦女於產後應補辦理胸部 X 光檢查。

Pregnant women and children under 12 years of age are exempt from chest X-ray examination; Pregnant women should undergo chest X-ray examination after the child's birth.

- 三、得申請免驗胸部 X 光檢查之資格：來自結核病盛行率低於十萬分之三十的國家，並檢具由精神科醫師出具申請人在心理上不適合進行胸部 X 光檢查之診斷證明書，經衛生福利部疾病管制署審核通過者，始得免除此項檢查。

Qualifications for applying exemption from chest X-ray examination: People who are from countries with a tuberculosis prevalence rate of under 30/100,000 and who have received the physical examination certificate that deemed the individual as being unsuitable to undergo chest X-ray examination, which is verified by CDC, are exempt from the examination.

- 四、腸道寄生蟲糞便檢查採離心濃縮法。

Stool examination for parasites should be done with centrifugal concentration.

- 五、15 歲以下兒童免驗梅毒血清檢查。

Children under 15 years of age are exempt from serological test for syphilis.

- 六、漢生病檢查為全身皮膚檢查，受檢者可穿著內衣內褲，並由親友或女性醫護人員陪同受檢。檢查時逐步分部位受檢，避免一次脫光全身衣物，維護受檢者隱私。

Hansen's disease examination refers to careful examination of the entire body surface, which should be done with courtesy and respect to the applicant's privacy. During the examination, the applicant is allowed to wear underwear and be accompanied by a friend or female medical personnel. Hospitals or clinics have the responsibility to protect the privacy of the applicant, and the examination should be done step by step. Hence, taking off all clothes at the same time should be avoided.

附錄三 免驗腸內寄生蟲糞便檢查之國家/地區表

Appendix 3 List of countries/areas not required to undergo stool examination for parasites

西太平洋區 Western Pacific Region	
澳洲 Australia	汶萊 Brunei Darussalam
香港 Hong Kong	日本 Japan
澳門 Macao	紐西蘭 New Zealand
韓國 Republic of Korea	新加坡 Singapore
臺灣之無戶籍國民 nationals without registered permanent residence in Taiwan	
東地中海區 Eastern Mediterranean Region	
巴林 Bahrain	科威特 Kuwait
卡達 Qatar	沙烏地阿拉伯 Saudi Arabia
阿拉伯聯合大公國 United Arab Emirates	
美洲區 Region of the Americas	
阿根廷 Argentina	加拿大 Canada
智利 Chile	美國 United States of America
歐洲區 European Region	
阿爾巴尼亞 Albania	安道爾 Andorra
亞美尼亞 Armenia	奧地利 Austria
白俄羅斯 Belarus	比利時 Belgium
波士尼亞與赫塞哥雅納 Bosnia and Herzegovina	保加利亞 Bulgaria
克羅埃西亞 Croatia	賽普勒斯 Cyprus
捷克 Czech Republic	丹麥 Denmark
愛沙尼亞 Estonia	芬蘭 Finland
法國 France	喬治亞 Georgia
德國 Germany	希臘 Greece
匈牙利 Hungary	冰島 Iceland
愛爾蘭 Ireland	以色列 Israel
義大利 Italy	哈薩克 Kazakhstan
拉脫維雅 Latvia	立陶宛 Lithuania
盧森堡 Luxembourg	馬爾他 Malta
摩納哥 Monaco	蒙特內哥羅 Montenegro
荷蘭 Netherlands	挪威 Norway
波蘭 Poland	葡萄牙 Portugal
摩爾多瓦 Republic of Moldova	羅馬尼亞 Romania
俄羅斯 Russian Federation	聖馬利諾 San Marino
塞爾維亞 Serbia	斯洛伐克 Slovakia
斯洛維尼亞 Slovenia	西班牙 Spain
瑞典 Sweden	瑞士 Switzerland
馬其頓 The former Yugoslav Republic of Macedonia	土耳其 Turkey
土庫曼 Turkmenistan	烏克蘭 Ukraine
英國 United Kingdom	

附錄五：健康檢查不合格之認定及處理原則

檢查項目	不合格之認定及處理原則
胸部 X 光 肺結核檢查	<p>一、活動性肺結核或結核性肋膜炎視為不合格。</p> <p>二、非活動性肺結核視為合格，包括下列診斷情形：纖維化(鈣化)肺結核、纖維化(鈣化)病灶及肋膜增厚。</p> <p>三、經診斷為「疑似肺結核」或「無法確認診斷」者，請攜帶體檢報告、胸部 X 光片至指定機構再檢查；所在縣市無指定機構者，得至鄰近醫院之胸腔科門診再檢查。</p> <p>四、不合格者得留臺治療後重新體檢，但時間依其停留簽證或入出境許可證之效期為限。</p>
腸內寄生蟲 糞便檢查	<p>一、經顯微鏡檢查結果為腸道蠕蟲蟲卵或其他原蟲類如：痢疾阿米巴原蟲(<i>Entamoeba histolytica</i>)、鞭毛原蟲類，纖毛原蟲類及孢子蟲類者為不合格。</p> <p>二、經顯微鏡檢查結果為人芽囊原蟲及阿米巴原蟲類，如：哈氏阿米巴(<i>Entamoeba hartmanni</i>)、大腸阿米巴(<i>Entamoeba coli</i>)、微小阿米巴(<i>Endolimax nana</i>)、嗜碘阿米巴(<i>Iodamoeba butschlii</i>)、雙核阿米巴(<i>Dientamoeba fragilis</i>)、唇形鞭毛蟲(<i>Chilomastix mesnili</i>)等，可不予治療，視為「合格」。</p> <p>三、不合格者得接受治療，檢具複檢陰性證明者，視為合格。</p> <p>四、妊娠孕婦如為寄生蟲檢查陽性者，視為合格；請於分娩後，進行治療。</p>
梅毒血清 檢查	<p>一、具下列任一條件，視為不合格：</p> <p>(一)未曾接受梅毒治療或病史不清楚者，其血清非特異性梅毒螺旋體試驗及特異性梅毒螺旋體試驗陽性。</p> <p>(二)曾經接受梅毒治療者，其血清非特異性梅毒螺旋體試驗效價≥ 4倍上升。</p> <p>二、血清非特異性梅毒螺旋體試驗及特異性梅毒螺旋體試驗：</p> <p>(一)非特異性試驗：快速血漿反應素試驗(RPR)或性病研究實驗室試驗(VDRL)。</p> <p>(二)特異性試驗：梅毒螺旋體血液凝集試驗(TPHA)、梅毒螺旋體粒子凝集試驗(TPPA)、梅毒抗體間接螢光染色法(FTA-abs)、梅毒螺旋體乳膠凝集試驗(TPLA)、梅毒螺旋體酵素免疫分析法(EIA)或梅毒螺旋體化學冷光免疫分析法(CIA)。</p> <p>三、梅毒血清檢查如使用中央衛生主管機關所增列之檢驗方法，得於其他下增列。</p> <p>四、不合格者得接受治療，檢具治療證明者，視為合格。</p>
麻疹及德國 麻疹抗體檢 查	<p>麻疹或德國麻疹抗體檢查報告為陰性或未確定者，且未檢具麻疹及德國麻疹預防接種證明者，視為不合格。但經醫師評估有麻疹及德國麻疹疫苗接種禁忌者，視為合格。</p>
漢生病檢查	<p>一、經診斷為「須進一步檢查」者，請至指定機構進一步檢查；所在縣市無指定機構者，得至鄰近醫院之皮膚科門診。</p> <p>二、不合格者得留臺治療後重新體檢，但時間依其停留簽證或入出境許可證之</p>

效期為限。

註：胸部 X 光肺結核檢查或漢生病檢查之再檢查指定機構名單請洽衛生福利部疾病管制署 (<http://www.cdc.gov.tw>)/國際旅遊與健康/外國人健檢/健檢指定醫院/「胸部 X 光檢查確認機構名單」或「漢生病個案確診及治療指定機構」。

Appendix 5: Principles in determining the health examination failed and further procedures

Test	Principles in determining the health examination failed and further procedures
Chest X-ray for Tuberculosis	<ol style="list-style-type: none"> 1. Active pulmonary tuberculosis or tuberculous pleurisy is failed. 2. Non-active pulmonary tuberculosis including calcified pulmonary tuberculosis, calcified foci and enlargement of pleura, is considered passed. 3. Those who are determined to be “TB suspect” or whose results are diagnosed “pending” diagnosis by the designated hospital in Taiwan must take the report and X-ray films to the referred institution for re-examination; those living in cities/counties without a referred institution, please visit the department of chest medicine at a nearby hospital. 4. People with failed results are allowed to stay for re-examination after receiving treatment, but the duration of stay depends on his/her visitor visa or entry/exit permit.
Stool Examination for Parasites	<ol style="list-style-type: none"> 1. By microscope examination, cases are determined failed if intestinal helminthes eggs or other protozoa such as <i>Entamoeba histolytica</i>, flagellates, ciliates and sporozoans are detected. 2. <i>Blastocystis hominis</i> and Amoeba protozoa such as <i>Entamoeba hartmanni</i>, <i>Entamoeba coli</i>, <i>Endolimax nana</i>, <i>Iodamoeba butschlii</i>, <i>Dientamoeba fragilis</i>, <i>Chilomastix mesnili</i> found through microscope examination are considered passed and no treatment is required. 3. People with failed results can accept treatment, and people with negative re-examination results are considered passed. 4. Pregnant women who have positive result for parasites examination are considered passed and please have medical treatment after the child's birth.
Serological Test for Syphilis	<ol style="list-style-type: none"> 1. Meeting one of the following criterion are considered failed : <ol style="list-style-type: none"> (1) Without past history of syphilis therapy or with unknown history, the non-treponemal test and the treponemal test are positive. (2) With past history of syphilis therapy, the non-treponemal test titers are 4-fold rising. 2. Serological non-treponemal tests and treponemal tests: <ol style="list-style-type: none"> (1) Non-treponemal tests : RPR or VDRL. (2) Treponemal tests : TPHA, TPPA, TPLA, EIA, CIA, and FTA-abs. 3. Those who had failed serological test for syphilis but have accepted treatment are considered passed
Measles and Rubella Antibody test	It is considered failed if measles or rubella antibody is negative (or equivocal) and no measles and rubella vaccination certificate issued. Those who have contraindications, not suitable for vaccinations, are considered passed.
Examination for Hansen's Disease	<ol style="list-style-type: none"> 1. Those who are determined to need further examinations by the designated hospital in Taiwan must go to the referred institution for further examinations; those living in cities/counties without a referred institution can visit the department of dermatology at a nearby hospital. 2. People with failed result are allowed to stay for re-examination after receiving treatment, but the duration of stay depends on his/her visitor visa or entry/exit permit.

短期研修健康檢查表 (丙表)

Medical Examination Requirements for Short-Term Students (Form C)

檢查日期 ____/____/____
(年)(月)(日)

Date of Examination ____/____/____
(M)(D)(Y)

基本資料 (Basic data)

姓名 Name	:	_____	性別 Sex	:	<input type="checkbox"/> 男 Male	<input type="checkbox"/> 女 Female
國籍 Nationality	:	_____	護照號碼 Passport No.	:	_____	
出生年月日 Date of Birth	:	____ / ____ / ____				

檢查項目 (Items required)

A. 麻疹及德國麻疹(風疹)之抗體陽性檢驗報告或預防接種證明 (Proof of Positive Measles and Rubella Antibody Titers or Measles and Rubella Immunization Certificates) :

a. 抗體檢查 Antibody Test

麻疹抗體 Measles antibody titer 陽性 Positive 陰性 Negative 未確定 (Equivocal)
德國麻疹(風疹)抗體 Rubella antibody titer 陽性 Positive 陰性 Negative 未確定 (Equivocal)

b. 預防接種證明 Immunization Certificate (含疫苗名稱、接種日期、接種單位或醫師簽章。如檢附幼時接種紀錄，其接種年齡必須大於1歲。)

(The certificate must include information such as the date of immunization, and the name of the hospital or clinic administering the vaccine or the signature of the physician administering the vaccine. If the childhood immunization record is submitted, it is important to include the record of the vaccines administered only after one year of age.)

- 麻疹預防接種證明 Measles Immunization Certificate
- 德國麻疹(風疹)預防接種證明 Rubella Immunization Certificate

c. 經醫師評估，有接種禁忌者，暫不適宜接種。(Having contraindications, not suitable for vaccination)

B. 胸部 X 光檢查肺結核 (Chest X-Ray for Tuberculosis) :

X 光發現(X-ray Findings) : _____

判定(Results) :

- 合格(Passed) 疑似肺結核(TB Suspect) 須進一步診斷(Pending) 不合格(Failed)
- 孕婦免驗 (Maternity Exemption)

備註(Note) :

一、本表為外籍學生、大陸及港澳地區學生來臺停留研修之健康檢查項目表。本表僅供參考用，學生可分別檢具預防接種證明及胸部 X 光檢查報告。This form lists the required medical examination items for students applying for short-term study in Taiwan. This form is only used for reference. Students may submit a copy of immunization certificates and the chest X-ray report instead of completing this form.

二、根據以上對_____先生/女士/小姐之檢查結果為

- 合格 不合格 須進一步檢查

Results : According to the above medical report of Mr./Mrs./Ms. _____, he/she

- has passed the examination has failed the examination needs further examination.

(Chief Medical Technologist) : _____ (Name & Signature)

: _____ (Name & Signature)

(Chief Physician) _____

(Superintendent) : _____ (Name & Signature)

日期 (Date) : ____/____/____

麻疹及德國麻疹(風疹)之抗體陽性檢驗報告或預防接種證明(二擇一)
Proof of Positive Measles and Rubella Antibody Titers or Measles and Rubella Immunization Certificates (alternative)

姓名 Name : _____ 性別 Sex : 男 Male 女 Female
國籍 Nationality : _____ 護照號碼 Passport No. : _____
出生年月日 Date of Birth : ____ / ____ / ____

a. 抗體檢查 Antibody Test

麻疹抗體 Measles antibody titer

陽性 Positive 陰性 Negative 未確定 (Equivocal)

德國麻疹(風疹)抗體 Rubella antibody titer

陽性 Positive 陰性 Negative 未確定 (Equivocal)

b. 預防接種證明 Immunization Certificate (含疫苗名稱、接種日期、接種單位或醫師簽章。)

(如檢附幼時接種紀錄，其接種年齡必須大於 1 歲。)

(The certificate must include information such as the date of immunization, and the name of the hospital or clinic administering the vaccine or the signature of the physician administering the vaccine. If the childhood immunization record is submitted, it is important to include the record of the vaccines administered only after one year of age.)

麻疹預防接種證明 Measles Immunization Certificate

德國麻疹(風疹)預防接種證明 Rubella Immunization Certificate

c. 經醫師評估，有接種禁忌者，暫不適宜接種。(Having contraindications, not suitable for vaccination)

(Chief Medical Technologist) : _____ (Name & Signature)

(Chief Physician) : _____ (Name & Signature)

(Superintendent) : _____ (Name & Signature)

檢查日期 (Date of Examination) : ____ / ____ / ____

胸部 X 光檢查肺結核報告
Chest X-Ray for Tuberculosis Report

姓名 : _____ 性別 : 男 Male 女 Female
Name : _____ Sex
國籍 : _____ 護照號碼 : _____
Nationality : _____ Passport No.
出生年月日 : ____ / ____ / ____
Date of Birth

X 光發現(X-ray Findings) : _____

判定(Results) : 合格(Passed) 疑似肺結核(TB
Suspect)

須進一步診斷(Pending) 不合格(Failed)

(Chief Physician) : _____ (Name & Signature)

(Superintendent) : _____ (Name & Signature)

檢查日期 (Date of Examination) : ____ / ____ / ____