National Taiwan Normal University

The Application Form for Enrollment in Labor Insurance
Labor Pension Contributions Report,
National Health Insurance Enrollment (Transfer In) Application for Category I Applicants
Copy 1 to be filed by General Service

Unit Filling out This Form:
Date Filled Out:

Tick if Applying only for Dependents	The Insured						Dependents (To be filled only if dependents' medical care insurance are appended to the insured)				Conforms with labor health insurance coverage and labor retirement pension conditions	
	Name	ID No.	Date of Birth	Total Monthly Salary	Retirement Pension 6%	Labor Pension Self-Contribution Retirement Pension 0-6%	Name	ID No.	Date of birth		Reason	Date of Onboarding (Enrollment in)
					6%							
												YYYY/MM/DD

Unit Filling out This Form						General Service, Office of General Affairs			
Headcount Check: Current Headcount	Contact Phone No.:	Principal Investigator		Supervisor		Headcount Check: Current Headcount	Medical insurance premium to deduct per month starting ____ Self-paid: NT$ Unit: NT$ Labor insurance premium to deduct per month starting_____ Self-paid: NT$ Unit: NT$ Retirement pension fund to deduct per month starting_____ : Self-Contribution: NT$ Public-Contribution: NT$ Labor insurance premium for the month of ____ : Self-paid: NT$ Unit: NT$ Retirement pension fund for the month of _____ : Self-Contribution: NT$, Public-Contribution: NT$	Supervisor (Signature/Chop-mark)	

Notes:

1. To ensure the rights and interests of the insured, please fill in this form and send it to the General Service and Management Office on the day of onboarding for said office to handle matters related to the insurance enrollment. If you do not enroll on the day you arrive at work, Labor Insurance will be applied for on the day the application form is sent to the office. (According to the Labor Insurance Act, Labor Insurance cannot be retroactively applied for.) The employer shall be responsible for any impact on the rights and interests of the individual due to insurance enrollment non-compliance.

2. Enrollment in labor retirement and health insurance will be done on the date of employment. (If you are a new employee, please attach photocopies of the approved appointment document and the front and back of the Citizen's ID card). The insurance coverage of dependents is limited to spouses and direct blood relatives, and no non-relative coverage is allowed. (If the dependents are 20 years old or older, please attach to the required documents a copy of a student card and a copy of the discharge order for those who have been discharged from the military for less than one year).

3. Please deduct the labor insurance, health insurance and labor retirement fees according to the amounts listed in the logbook of the General Service and Management Office.

4.A week prior to resignation, please proceed to the General Service and Management Office for insurance withdrawal processing. If the employing unit does not notify the Insurance Bureau of the surrender of the policy immediately in violation of the regulations, the insured shall be responsible for reimbursement of the premiums (including the premiums borne by the individual and the employer) during the period, and the employing unit shall be held jointly liable.

5. General Service, Office of General Affairs Tel:7749-1938 Fax：23626341

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