**Chaoyang University of Technology**

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| **Personal Data Collection Statement**  According to Article 8 of the Personal Data Protection Act (hereinafter referred to as “the Act”), Chaoyang University of Technology (hereinafter referred to as “CYUT”) notifies you of the following for collecting personal data of the appointed teacher:  **提聘單位填表注意：**  1.本表將呈現於各級教評會議，各欄位字型、大小及格式已設定，請勿任意更改，並請注意版面整齊，勿任意跨頁。  2.藍色框框資料由提聘單位填寫完畢後，交由擬聘教師填寫並簽章。  3. 老師已詳閱「教師提聘個資告知聲明」，無需列印此頁面；請兼任教師必填「兼任教師社會保險調查表」並繳回。  4.老師填回之提聘資料，請提聘單位承辦人除確認各欄位是否都填寫，並確核其與相關證明文件資料是否相符(例:日期、號碼等)再提會審議。  5.若有不明瞭之處，可參閱「教師提聘資料檢核表」、「兼任教師聘任行政作業說明及注意事項」或詢問人資處承辦人，以減少文件往返時間。  **提供老師填寫前、列印前請先刪除本文字方塊**   1. Purpose of collecting personal data: CYUT collects your personal data for human resource management (Specific Purpose 002), including but not limited to employment, salary management, performance appraisal, retirement, training and development, hygiene and health, access control, library resource utilization, grievance, medication, insurance, welfare, human resource management system establishment, and internal survey and data analysis. 2. Categories of the personal data to be collected: details as shown in *CYUT Hiring Proposal for Appointed Teacher*. Code Types of identification (C001, C003), characteristics (C011), social conditions (C031, C033, C034, C038, C039), education, examination, technique or other profession (C051, C052, C056), employment (C061, C062, C063, C064, C066, C072), details concerning finance (C088), health and other (C111, C115). 3. Time period and territory in which the personal data is used: within Taiwan (including Penghu, Kinmen, and Matsu, etc.). Unless otherwise stipulated in the Act, CYUT shall use the above data from now until its duration. 4. Recipients and methods of which the personal data is used:   (1) CYUT shall use your personal data for contact and notification for the above purposes, if necessary.  (2) Appropriately provide your personal data to third parties such as government authorities, tourist-related units, and other relevant institutions whenever necessary.   1. You may exercise the rights as stipulated in Article 3 of the Act concerning your personal data to inquire, review, request a copy, supplement, correct, and demand the cessation of the collection, processing, use of and erase of your personal data. CYUT may reject your request if there are otherwise stipulated rules. You may contact the Office of Human Resources of CYUT (Tel: 04-23323000#3028) to exercise your rights. CYUT shall not be liable for compensation if your rights and interests are damaged due to your exercise of the above rights. |

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| **兼任教師社會保險調查表** ※兼任教師必填繳 | | | | |
| **姓名** |  | **身分證字號** |  | |
| 以下欄位將做為勞工保險投保與退休金提撥依據，請詳實填寫  (勾選3至6項者，請續填**勞保加保聲明**) | | | | |
| □1.現職具軍人保險被保險人身分者。  □2.現職具公教人員保險被保險人身分者。  □3.現職具農民保險被保險人身分者。  4.現職具勞工保險身分之下列全部時間工作者：  □4-1.勞工保險身分之機關學校專任有給全時人員。  □4-2.勞工保險身分之公民營事業機構之全部時間受僱者。  □4-3.勞工保險身分之雇主或自營業主。  (所稱雇主或自營業主,請參考全民健康保險法施行細則第10條規定)  □4-4.勞工保險身分之專門職業及技術人員自行執業者。  (所稱專門職業及技術人員自行執業者,請參考全民健康保健法施行細則第11條、專門職業及技術人員考試法第2條及專門職業及技術人員考試法施行細則第2條規定)  □5.已依相關退休(職、伍)法規，支(兼)領退休(職、伍)給予者。  退休機關/學校： 。  □6.非上述身分。 | | | | |
| **勞保加保聲明，前項勾選第3至6項者續填** | | | | 參加勞保分類 |
| □ 1.年滿15歲以上65歲以下，不具公、軍、農保險身分之勞工。  □ 2.年滿65歲曾有勞保年資且未領取老年給付再從事工作者。  □ 3.已領取非勞保老年給付後且未滿65歲，再受僱從事工作者。  □ 4.符合公保養老給付請領條件並退出公保者，於領取公保養老給付前，尚未享有該給付保障，再受僱從事工作者。 | | | | 勞保(含職災、就保) |
| 凡年滿15歲以上，65歲以下之受僱勞工，  □ 1.已領取勞工保險老年給付者。  □ 2.受僱於依法免辦登記且無核定課稅或依法免辦登記且無統一發票購票證之雇主或機構者。 | | | | 勞保(含職災、無就保) |
| □ 已請領勞保老年給付再從事工作者。  □ 年滿65歲已領取其他社會保險養老給付再從事工作者。  □ 年滿65歲無參加勞保紀錄再從事工作者。 | | | | 職災 |

兼任教師社會保險調查表

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| 1. **Courses teaching** *(Items 1 to 3 to be completed by the unit hiring)* | | | | | | | | | | | | |
| Curriculum | | Year | | Compulsory / Selective | | Subject Category | | Course Name | | | Credit | Hours per week |
| 🞏4-yr technical program  🞏2-yr technical program  🞏Evening Division  🞏Graduate Institute | |  | | 🞏 Compulsory  🞏 Selective | | 🞏 Professional or Technical Subject | |  | | |  |  |
| 🞏 General or General Education Subject | |
| 🞏4-yr technical program  🞏2-yr technical program  🞏Evening Division  🞏Graduate Institute | |  | | 🞏 Compulsory  🞏 Selective | | 🞏 Professional or Technical Subject | |  | | |  |  |
| 🞏 General or General Education Subject | |
| 🞏4-yr technical program  🞏2-yr technical program  🞏Evening Division  🞏Graduate Institute | |  | | 🞏 Compulsory  🞏 Selective | | 🞏 Professional or Technical Subject | |  | | |  |  |
| 🞏 General or General Education Subject | |
| 1. **Academic strengths related to the subjects teaching** *(please prioritize according to relevancy)* | | | | | | | | | | | | |
| 1. | | | 2. | | | | 3. | | 4. | | | |
| 1. **Thesis title of the highest education** *(please provide Chinese name if it is in foreign language; for holder of Teacher Certificate please write “Nil”)* | | | | | | | | | | | | |
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| 1. **Current employment and past major experience**   \*Teacher teaching professional or technical subjects must possess at least one year working experience in the related industry.  \*Attach supporting documents: employment proof, termination proof or record of labor insurance (please specify full/part time employment, position and signature). | | | | | | | | | | | | |
|  | Full- / Part- time | | | | Full Name of Company / Authority / School | | | Full Name of Position | | Employment Period *(Start and End date)* YYYY/MM/DD | | |
| Current Employment | Submit to Ministry of Education each semester (Oct & Mar) base on below stated data | | | | | | | | | | | |
| 🞏Nil 🞏School 🞏Industry 🞏Government Unit | | | | | | | | | | | |
| ◼ Full-time | | | |  | | |  | | to present | | |
| Past Major Experience | 🞏 Full-time  🞏 Part-time | | | |  | | |  | | to | | |
| 🞏 Full-time  🞏 Part-time | | | |  | | |  | | to | | |
| 🞏 Full-time  🞏 Part-time | | | |  | | |  | | to | | |

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| 1. **Personal information of appointed teacher** | | | | | | | | | | |
| Name in English  *(as shown in passport)* | |  | | | | | Date of Birth | YYYY/MM/DD | | |
| Employee No. *(optional)* | |  | | | | | Gender | 🞏Male (Military Service: 🞏Discharged 🞏Exempted)  🞏Female | | |
| Nationality | | 🞏Taiwan, ID No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  🞏\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ARC / Passport No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(please attach copy of ARC and passport)* | | | | | Identity | 🞏General  🞏Indigenous (Tribe \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)  🞏Disability Level:  Category:  Classification Date: | | |
| Contact | | Mobile | | 09 | | | Email |  | | |
| Address | | Postal Code |  | | | | | |
| 1. **Education** *(For overseas education, the school should be listed in the* [*reference list of Ministry of Education*](https://depart.moe.edu.tw/ed2500/News.aspx?n=E8380E03A0E16960&sms=D2E10027BB4EC183)*, and the diploma should be certified by overseas missions.)* | | | | | | | | | | |
| Status | Degree | | Name of School  *(please specify country for overseas school)* | | | College/Department/  /Subject | | | Period  *(Start and End date)* YYYY/MM/DD | Date of Conferment YYYY/MM |
| Attained | Higher Education | |  | | |  | | |  |  |
| Master | |  | | |  | | |  |  |
| Doctoral | |  | | |  | | |  |  |
| Others |  | |  | | |  | | |  | 🞏 Continuing  🞏 Non-completion |
| 1. **Teacher Certificate for Higher Education or above** *(data should match with those on the Teacher Certificate)* | | | | | | | | | | |
| Certificate No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, School reviewing \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,  Qualification start from \_\_\_\_\_\_\_\_(year)\_\_\_\_\_\_\_\_\_\_(month). | | | | | | | | | | |

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| **Declaration by the appointed teacher**   1. I do not pertain to any situations as stipulated in the Act Governing the Appointment of Educators, Teachers’ Act, and Regulations Governing Appointment of Part-time teacher at Junior College and Institutions of Higher Education that restricted me from being appointed as a teacher. 2. I am not involved in any criminal cases.   I shall bear all legal responsibilities and accept stringent disciplinary actions (including dismissal, suspension of duty, contract non-renewal, and contract termination) if I am untrue. |
| I have read and understood the Personal Data Collection Statement and the Declaration by the appointed teacher. I hereby confirm that the information provided in this hiring proposal is true and agree the school handles it per related regulations.  Signature: Date:  YYYY/MM/DD |

教評會審議及會簽情形如下：

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| 1. **系級教評會初審 　　 學年第 　　 學期第 　　 次系教評會決議（　　/　　/　　）**   **第二頁** | | | | | |
| 應到人數 | 出席人數 | 具審議資格人數 | 贊成票數 | 反對票數 | 棄權（無效）票數 |
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| 審議結果：  一、擬聘之教師  □教師學術專長及業界實務經歷與任教領域相關。  □符合教師「提聘資料檢核表」檢視項目。  二、□通過，聘期自民國　　年　月　日起聘，續提院教評會複審。  □不予通過，原因：  三、增聘原因及其他決議，於會議紀錄中述明。 | | | 重要決議摘錄： | | |
| 承辦人簽章/日期  連絡分機： | | |
| 系級主管(召集人)簽章/日期  **(繳驗證件如屬影本或電子證書均應經查證無誤。)** | | |

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| **9. 院級教評會複審 　　 學年第 　　 學期第 　　 次院教評會決議（　　/　　/　　）** | | | | | |
| 應到人數 | 出席人數 | 具審議資格人數 | 贊成票數 | 反對票數 | 棄權（無效）票數 |
|  |  |  |  |  |  |
| 審議結果：  一、□通過，聘期自民國　　年　月　日起聘，續提校教評會決審。  □不予通過，原因：  二、教師資格外審作業：  □無需辦理 □已完成外審通過 □會議後補正。  三、其他決議，於會議紀錄中述明。 | | | 重要決議摘錄： | | |
| 承辦人簽章/日期  連絡分機： | | |
| 院級主管簽章/日期 | | |

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| **教務處會簽** | **人力資源處會簽** |
| □課程經校課程委員會通過。  □本案教師授課鐘點符合本校授課鐘點計算準則。  □其他： | □已依規定完成院教評會審議通過，擬續提校教評會審議。  □其他： |
| **校長核示** | |
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