

Chang Jung Christian University Student Group Accident Insurance Refusal Agreement

In the University's student group accident insurance purchased for student protection, the Ministry of Education subsidizes NT\$100 per student per academic year. However, each student is required to pay in each semester the part of premium that is not subsidized to ensure compensation in case of death, disability, hospitalization or surgery claims.

I, _____, state my non-agreement to pay premium because I am applying for leave of absence from school delayed graduation, and voluntarily waive any legal and compensation rights. I hereby sign this agreement as prove of my non-agreement.

Affiant : _____ (Signature) Student Number: _____ Department and Class: _____

Telephone : _____

Semester of insurance refusal: From Academic Year _____ Semester __ to Academic Year _____ Semester __.

Parent Cell Phone: _____ Legal Guardian or Authorized Agent: _____ (Parent signature is not required for students aged 18 or above)

Date: (yy) (mm) (dd)

Chang Jung Christian University is obligated to inform the affiant of the Personal Information Protection Act.

In compliance with Article 8 Paragraph 1 of the Personal Information Protection Act (hereinafter referred to as the Personal Act), Chang Jung Christian University (hereinafter referred to as the University) hereby informs the affiant of the following. Please read carefully and consent to the collecting, processing and use of the information within the scope of Items 1-3 delineated below:

1. Purpose for collecting information: Implementation of matters pertaining to personal insurance.
2. Category of collecting personal information collected: Chang Jung Christian University Student Group Accident Insurance Refusal Agreement
3. Duration, region, target and method of personal information use:
 - (1) Duration : 4 years from the date of agreement.
 - (2) Region: Taiwan
 - (3) Object : The University, underwriter of the student insurance.
 - (4) Method: Paper copy filed at the Health Services Section, Office of Student Affairs.
4. In accordance with Article 3 of the Personal Information Protection Act, the affiant may exercise the following rights in respect to his or her personal information held by the University:
 - (1) Check, request to read or request a copy of the information from the University. In accordance with the law, the University may request payment for necessary cost.
 - (2) Request the University to supplement or correct the information. However, in accordance with the law, the affiant shall provide appropriate explanation.
 - (3) Request the University to stop collecting, processing or utilizing the information, and request the information to be deleted. However, in accordance with the law, the University may refuse the request on account of necessary operations.
5. Impact on personal rights and interests if affiant fails to provide information: The affiant has the right to not provide relevant personal information. However, those who refuse to provide relevant personal information may not be able to have their insurance withdrawal processed, and shall be regarded as continuing to be enrolled in the insurance.

I have been informed of the above matters by the University, and clearly understand the purpose of my information collection, processing and utilization by the University. I consent to the collection, processing and utilization of my personal information as delineated within the scope of Items 1-3 in the above notification.

Informed person : _____ (Signature) Authorized agent : _____ (Signature)