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Application form for part-time assistant, work-study student and temporary staff of CJCU

Personnel category	☐part-time assistant－Lecturer level ☐Part-time assistant - teaching assistant level ☐part-time assistant－Ph.D. graduate student ☐Part-time Assistant - Postgraduate	☐part-time assistant－college students ☐Part-time assistant - non-university students ☐work-study student ☐temporary staff	
Hiring category	☐newly hired ☐re-employment ☐change employment	Department class	
Name		Id number	
		Birth	/ / / (yyyy/mm/dd)
Address		Phone number	

☐ I have confirmed that the personal information, including my ID number, entered is accurate and agree that your school may collect, process, and use this information for necessary purposes in handling labor insurance, health insurance, and related recruitment procedures. I acknowledge and agree not to provide copies of my ID card and student ID. **Foreign nationals should also submit a valid residence permit and work permit for verification.**

academic qualifications		E-mail	
Participate in the program during employment	Name of the Program ：		
	Unit of the Program：		Program host：
	Number of the Program：		Program start and end date：
During the employment period, did you work as a work-study or assistant with salary (entitled to labor insurance) in other units of the school at the same time?	☐Yes，Unit：_____ ☐No		
Employment period	/ / ~ / / / (yyyy/mm/dd)		
Salary（NTD）	☐PER MONTH_____yuan ☐PER DAY _____yuan ☐PER HOUR _____yuan	Source of Funding	☐government grants Agency name： ☐Other unit subsidy programs Agency name：
Reasons for re-employment and change employment	☐1. The original program (funding) ends(Name of the Program)：_____)，New program (funding) contract renewal (Name of the Program：_____)During execution：_____~_____)。 ☐2. The former assistant resigned for some reason.Name：_____ ☐3. Other reasons:_____		

Hiring personnel statement and precautions	**Surety** _____（**SIGN**），I hereby declare that I am not a project host and co-host's spouse or relatives within four degrees of blood or relatives of marriage within three degrees of the research project that should be avoided as a full-time assistant, part-time assistant or temporary worker. Write off related expenses. 1.I'm ☐general personnel☐Persons with disabilities (attach a copy of handbook for persons with disabilities) ☐Aborigines (attach a copy of the household registration transcript) 2.I'm ☐National students ☐Foreign students (with valid work permit) ☐Overseas Chinese students (attach valid work permit) 3.The salary in this case is negotiated by the employer and the employee, and there is no objection. 4.If I have unpaid labor, health insurance premiums, and labor pensions before the date of employment, I am willing to bear the responsibility for payment. 5.I'm ☐willing ☐not willing to apply for the transfer of health insurance.
Precautions	1. According to the plan commissioning agency or funding regulations, the use of personnel should be signed and approved in advance through the school's administrative procedures before they can be contracted. If the regulations are not followed, the personnel related funds cannot be written off, and the plan host or the employer is responsible. 2. If the plan has not been approved by the entrusting unit or the funds have not been approved (allocated), and the personnel must be employed first, an application for employment should be submitted first, and labor insurance

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	should be processed on the day of employment. After that, if the personnel-related funds cannot be written off or If it is recovered, the project host or the employer is responsible. 3. If the personnel to be recruited leave the job midway during the employment period (including those who have added insurance, but have not completed the employment case or completed the registration procedures) or do not renew the employment after the expiration of the employment period, they should assign personnel to maintain labor and health insurance before the effective date of resignation. Surrender application form』 Send to the File collection unit (such as each college, research and development office, teaching resource center, extracurricular group, etc.) 4. If the insurance of the employees is not handled in accordance with the regulations, resulting in insurance accidents and the inability to apply for labor insurance benefits, or the penalty imposed on the school by the Labor Insurance Bureau, or when the staff leave without notifying the File collection unit (such as colleges, research and development offices, teaching departments, etc.) Capital Center, Extracurricular Team, etc.) transfer to the Personnel Office to handle labor, health insurance and labor pension withdrawals, resulting in overdue surrender of labor, health insurance premiums and labor pensions, or if there are unpaid labor and health insurance premiums when the personnel leave the company, The project host or the employer is responsible for the payment. 5. Based on the idea of cultivating research talents, it is advisable to give priority to the students of the school for the part-time assistants and temporary staff of the teacher's research project. 6. The age of concurrent assistants and temporary personnel shall not exceed the retirement age; the employment of work-study students shall mainly be the students of the school, and personnel from other schools shall not be employed. 7. After this application form is signed by the president, please send the original copy of the application form (including attachments) to the File collection unit (such as each college, research and development office, teaching resources center, extracurricular group, etc.). ※**Program host Sign:**_____
Documents to be attached (Please bind in order)	1. **1** Original copy of employment application。 2. **1**original copies of the consent form for the student to work concurrently as an assistant for study and employment. 3. Employment Agreement **1 in 1 copies**。 4. **1** copy of health examination data in the past five years (for labor insurance)。 5. **1** copy of residence permit and work permit for foreign students within the validity period. 6. **1** copy of your ID card (required for non-school personnel).

Matters related to personal information protection

The personal information collected by this form is used for a specific purpose only, and will not be transferred without the consent of the parties. We will comply with CJCU regulations on personal data protection and information security. Please read the complete statement of personal data collection, processing and use in detail. The latest version of this statemen can be obtained from CJCU website at https://www.cjcu.edu.tw/pims or from the office.

When you sign and submit this form, it means that you are aware of the specific purpose of collecting, processing, and using your personal information by CJCU.

Applicants		Personnel Office	
Program host (Employer)		Accounting Office	
Section supervisor		Office of Secretariat	
First-level supervisor		Office of president	
File collection unit			

File collection unit receipt date： / / / (yyyy/mm/dd) Number：_____

◎File delivery order：Applicants→Program host(Employer) →Section supervisor→First-level supervisor→File collection unit →Personnel Office→Accounting Office→Secretariat→president→Program host(Employer)。

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(Attached by foreign nationals) A photocopy of the front of their valid residence permit. (Please copy clearly)	(Attached by foreign nationals) A photocopy of the reverse of their valid residence permit. (Please copy clearly)

(Attached by non-school personnel) Photocopy of the front of the ID card (Please copy clearly)	(Attached by non-school personnel) Photocopy of the reverse of the ID card (Please copy clearly)