



2018 年馬來西亞華裔青年臺灣觀摩團 申請資料檢查表

姓名：(中) _____ (英) _____

性別：_____ 年齡：_____ 申請人電話：_____ 州屬：_____

(本會發出訊息以此號碼為準)

按照此表順序一併呈上申請 放在第一張

序號	文件項目	核對 (✓)	備注
A 部份			
1	PASSPORT SIZE 照片共 5 張 (貼在表格上 3 張, 另外寄 2 張到本會)		
2	團費 RM2,898.00 支票 / 銀行匯票 (寫申請日期當天, 抬頭註明 GMT AGENCY SDN BHD) 背面寫上中英名字		
3	2018 馬來西亞華裔青年臺灣觀摩團團員資料表一份 (編號: 2)		
4	身份證影印本一份		
5	家長 / 團員切結書一份 (編號: 3)		
B 部份			
6	僑務委員會 2018 年海外華裔青年臺灣觀摩團報名表 (共 4 頁) 貼上 1 張照片 家長及申請人必須在最後一張簽名 (編號: 4-7)		
7	僑務委員會海外華裔青年臺灣觀摩團個人資料蒐集、處理及利用告知事項 (共 2 頁) (編號: 8-9)		
8	僑務委員會海外華裔青年臺灣觀摩團健康證明檢查項目表 貼上 1 張照片 (編號: 10)		
9	X - 光檢查書面報告 (正本)		
10	驗血 (B 型肝炎) 書面報告 (正本)		
11	護照 (有效日期必須在 2019 年 7 月 1 日以後) 影印本 2 份		
C 部份			
12	投保申請書 僅填寫自己所知道的部份即可 (編號: 11-12)		
D 部份			
13	2 個 A4 信封, 每個貼 RM2.00 郵票, 並清楚寫上自己姓名、地址, 以免延誤寄發通知信		



2018 年馬來西亞華裔青年臺灣觀摩團 申請須知

1. 活動名稱：2018 年馬來西亞華裔青年臺灣觀摩團
 - 1.1. 活動目的：僑務委員會以「認識中華民國臺灣」為主軸，以「行動式生活教學」之方式，讓馬來西亞青年透過動態與靜態的參訪與學習，親身體驗中華傳統文化之精髓與傳承、臺灣多元文化之融合力與創造力，並對臺灣各地人、事、物、景及各項政經社教發展現況有深刻的瞭解、體驗與認同，達到傳揚臺灣多元文化、擴增青年國際交流及搭建兩國青年友誼橋樑
 - 1.2. 活動內容：以認識中華民國臺灣，增進國內外青年交流為主題之參訪觀摩活動，為期 3 週。
2. 主辦單位：中華民國僑務委員會
3. 承辦單位：亞洲大學
4. 指導單位：駐馬來西亞臺北經濟文化辦事處
5. 籌組單位：馬來西亞華裔青年臺灣觀摩團輔導委員會
6. 行程日期：**2018 年 12 月 6 - 26 日** (共 21 天)
7. 行前說明：**2018 年 12 月 5 日** (所有團員必須參加)
8. 團費：RM2,898.00 (含吉隆坡 / 臺北往返機票，旅遊保險、行前說明會膳宿、送往機場交通、服裝、感言特輯、在臺團員健康保健、行程由僑務委員會支應新臺幣貳萬元)
9. 註冊費：每人新臺幣 12,000 元整 (團員自行帶去臺灣繳交予承辦單位)
10. 申請說明：
 - 10.1. 凡居住在馬來西亞，身心健康、學行良好，能適應團隊生活之華裔青年男女年齡 15 - 25 歲 (1993 至 2003 年出生者) 皆可申請
 - 10.2. 為使參加機會均等普及，以未曾參加者優先錄取，同一家庭不限申請人數
 - 10.3. 團員必須全程參與，所有團員必須隨團赴臺灣及返回馬來西亞，不得在臺灣延期居留
 - 10.4. 患有精神心理疾病、嚴重痼疾、癲癇症、傳染病或其他隨時可能發生身體重大症狀者，不得報名
 - 10.5. 活動期間若宿疾復發或突發病症，送醫所需醫療等費用，團員及其家長應自行負擔，與主 / 承辦 / 籌組單位無涉
 - 10.6. 為安全考量，若團員在行前說明會報到時，發現疾病纏身或已有身孕者，將不予放行隨團參加，團員必須立即返家
 - 10.7. 支票一旦過帳，視同錄取，獲錄取者不可因故申請退團，缺額由本會遴選填補，不得自行遞補，所繳費用恕不退還，或視情況扣除行政費用
11. 必備文件：
 - 11.1. 本會印制團員資料表一份，並貼上一張照
 - 11.1.1. 資料表內推薦單位可請人民代議士、校長、社團領袖或觀摩團歷屆團長或幹部簽名推薦
 - 11.2. 僑務委員會 2018 年海外華裔青年臺灣觀摩團報名表 (共 4 頁) 並貼上一張照片
 - 11.3. 僑務委員會海外華裔青年臺灣觀摩團個人資料蒐集、處理及利用告知事項 (共 2 頁)
 - 11.4. PASSPORT SIZE 近期照片 5 張 (3 張貼在表格上，另外附上 2 張寄到本會)
 - 11.5. 家長 / 團員切結書一份
 - 11.5.1. 2 個 A4 信封貼上 RM2.00 郵票，並清楚寫上自己姓名、地址
 - 11.6. A. 身份證影印本 1 份 B. 護照影印本 2 份 (有效日期必須在 2019 年 7 月 1 日以後)
 - 11.7. 團費 RM2,898.00 支票或銀行匯票 (寫申請日期當天支票，抬頭註明 **GMT AGENCY SDN BHD**，未被錄取者，原票退還)
 - 11.8. 投保申請書 (僅填寫自己所知道的部份即可)
 - 11.9. 僑務委員會海外華裔青年臺灣觀摩團健康證明檢查項目表含 X 光暨 B 型肝炎檢驗書面報告並貼上一張照片
 - 11.10. 資料填妥、文件準備好後請徑寄：
馬來西亞華裔青年臺灣觀摩團輔導委員會 **GMT AGENCY SDN BHD**
8A, JALAN CUNGAH, 42000 PORT KLANG, SELANGOR, MALAYSIA. TEL: 016 - 332 3158
E-mail: guanmotuan16@gmail.com
12. 報名截止日期：2018 年 9 月 30 日 (以郵戳為憑，逾期不予受理)
13. 正式名單預計於 8 月下旬發佈，被錄取者將接獲本會發出電話簡訊及正式信函通知
14. 本會採全國十四州屬機會均等原則，申請者務必妥善準備所須文件，缺一不可，敬請留意
15. 本會依據僑務委員會 2018 年海外華裔青年臺灣觀摩團籌組須知辦理



中華民國僑務委員會



馬來西亞華裔青年臺灣觀摩團輔導委員會

貼照片一張

2018年馬來西亞華裔青年臺灣觀摩團 團員資料表

1. 姓名: (中) _____ (英) _____ 性別: 男 ☐ 女 ☐

2. 出生日期: _____ 身份證號碼: _____ 報生紙號碼: _____ 年齡: _____

3. 護照號碼: _____ 有效日期: _____ 婚 / 已婚 (配偶姓名) _____

4. 電話: 家 _____ 手提: _____ 電郵: _____
傳真: _____ 緊急聯絡電話: _____

5. 身高: _____ cm 血型: _____ 體重: _____ kg 衣服尺碼: S / M / L / XL / XXL 餐別: 一般 ☐ 素食 ☐

6. 學歷: _____ 職業: _____ 公司 / 學校: _____
就讀年級 / 班別: _____ 宗教: _____

7. 永久地址: _____
_____ 郵編: _____

8. 父親姓名: (中) _____ (英) _____

9. 母親姓名: (中) _____ (英) _____

10. 曾否參加觀摩團 / 客家營? _____ 年 曾經報名未被錄取: _____ 年
家中有成員曾經參加觀摩團 / 客家營? 姓名: _____ 年度: _____ 關係: _____

11. 參加活動 / 團體經驗: (請填寫三項最具代表性之記錄)

活動 / 團體名稱	參加年度	擔任職務	地點	備注

12. 專長: 1. _____ 2. _____ 3. _____

13. 參加觀摩團的期待 / 原因是 _____

14. 是否願意為觀摩團服務? 願意 ☐ 不願意 ☐

15. 今年是否參與 STPM / SPM 考試? 有 ☐ 沒有 ☐

編號: _____

**我確認以上所填屬實，且誓言遵守規章，遇有不實，自願棄權；
並同意支票過帳後視同錄取，將不申請退團退費。**

支票 / 匯票號碼: _____

報名截止日期: 30.09.2018

銀行名稱: _____ 分行 _____

申請人簽名: _____ 家長簽名: _____
(所有申請人均必須具家長簽名，否則不予受理)

推薦人/單位: _____ 日期: _____

敬致:



中華民國僑務委員會



馬來西亞華裔青年臺灣觀摩團輔導委員會

2018年馬來西亞華裔青年臺灣觀摩團 家長 / 團員切結書

本人 (家長姓名) _____ (英) _____

身份證號碼: _____ 同意吾兒 / 吾女

團員姓名: _____ (英) _____

身份證號碼: _____ 護照號碼: _____

1. 參加本年臺灣觀摩團，並將督促遵守所定規章；
2. 本人同意吾兒 / 吾女於自由活動日與親戚朋友外出，唯必遵守相關規定
3. * 吾兒 / 吾女確曾患 _____ 病歷，如今已無大礙
若於活動期間遇有狀況，概由本人承擔責任歸屬，與主辦、承辦及籌組單位無關。

特具此書。

緊急聯絡人: _____

聯絡電話: _____ (手提): _____

家長簽名: _____ 團員簽名: _____

日期: _____

* 遇有相關情事者請填寫



僑務委員會

OCAC, Republic of China (Taiwan)

2018年僑務委員會海外華裔青年臺灣觀摩團報名表

Application Form for 2018 Compatriot Youth Taiwan Study Tour

填寫報名表前，務請先詳閱招生簡章各項說明與規定。

(Please read admission guidelines carefully before filling out the application form.)

相片

(1張)

Attach 1

Recent 1-inch

Photos Here

姓名	中文 NAME IN CHINESE				
	英文 NAME IN ENGLISH	First Name (Capital Letters) Last Name			
出生地 PLACE OF BIRTH		出生日期 DATE OF BIRTH	Month day year	性別 SEX	<input type="checkbox"/> 男 <input type="checkbox"/> 女 Male Female
國籍 NATIONALITY		住址 HOME ADDRESS	(Capital Letters)		
電話 TEL		傳真 FAX		電郵 E-mail	
飲食習慣 <input type="checkbox"/> 葷食 <input type="checkbox"/> 素食 <input type="checkbox"/> 其他 _____					
是否曾學習華語 <input type="checkbox"/> 是 _____ 年 <input type="checkbox"/> 否 華語程度 <input type="checkbox"/> 零程度 <input type="checkbox"/> 初級 <input type="checkbox"/> 中級 <input type="checkbox"/> 高級					
護照 PASSPORT	發照地點 PLACE OF ISSUE		號碼 NUMBER		失效日期 DATE OF EXPIRY

父母資料 PARENTS (Give complete addresses only if different from home address above)

	父親 FATHER (In Chinese)	母親 MOTHER (In Chinese)
姓名 NAME		
服務機構 OFFICE OR COMPANY		
參加僑團或僑社 O. C. SOCIETY		

在臺親友緊急聯絡人 (20 歲以上) RELATIVE OR FRIEND FOR EMERGENCY CONTACT IN TAIWAN (Above age 20)

姓名 NAME IN CHINESE	電話 TEL ()	與本人關係 RELATION
	傳真 FAX ()	
服務機構 OFFICE OR COMPANY		職稱 POSITION

觀摩研習梯次 WHICH TERM ARE YOU APPLYING FOR?

☒ 第 8 梯次 8th Term (Malaysia) (12/6 - 12/26)

⑥ 是否患有下列疾病? Do you have any of these diseases? ☐ 否 NO

- | | |
|--|--|
| <input type="checkbox"/> 痼疾 CHRONIC DISEASE, ex: _____ | <input type="checkbox"/> 精神心理疾病 PSYCHOGENIC ILLNESS |
| <input type="checkbox"/> 癲癇 EPILEPSY | <input type="checkbox"/> 心臟腦血管病變 CARDIO-VASCULAR DISEASE |

如患有上列疾病或其他重大身體不適癥狀 (如糖尿病、傳染病或懷孕等) 足以影響活動之進行, 請勿報名參加, 抵臺後如經發現患有以上病癥致發生事故者, 應自行負責, 並負擔醫療及返回僑居地等相關費用。

Please do not apply for admission, if you have any of the above mentioned diseases or any symptoms such as diabetes, epidemics or pregnancy which may affect the participation of the activity. If any of the above mentioned medical conditions is discovered after arriving in Taiwan, the student must pay his/her own medical and return expenses

請注意本頁每欄務必須填寫, 否則申請表件不予受理。

Please note that all information must be completed; otherwise your application won't be accepted.

2018 年海外華裔青年臺灣觀摩團 活動須知

- 一、活動內容：以認識中華民國臺灣，增進國內外青年交流為主題之參訪觀摩活動，為期 3 週。
- 二、團員於活動前，應先參加行前說明會，以瞭解觀摩團之意義及應行注意事項，俾抵臺後能適應團體生活，遵守團體紀律。
- 三、報名須知：
 1. 年滿 15 歲足歲至未滿 25 歲 (以護照所載年齡為憑)，目前居住於海外，身心健康、學行良好並能適應團隊生活之華裔青年，報名者須具高度學習意願、且能全程參加活動並願接受團隊管理紀律之自願者。
 2. 費用：
 - (1) 觀摩團團（職）員應繳交**新臺幣 12,000 元整**，於報到時繳交承辦單位，中途離團者，不予退費。
 - (2) 觀摩團團（職）員來回機票、個人零用金、在僑居地參加保險之保險費、醫療等費用自行負擔，其在臺灣觀摩 3 週之膳、宿、交通等費用均由僑務委員會支付。
 3. 申請人必須準備 1 吋半身 (2.54cm) 照片 5 張、僑居國護照。
 4. 如有疾病或重大身心不適癥狀 (例如心臟病、腦血管疾病、糖尿病、精神病、癲癇症、傳染病、懷孕等) 可能影響活動之正常參加者，請勿報名，否則如因此發生事故，應自行負責，與主、承辦單位無涉。
 5. 凡已核准回國升學之僑生，不得報名。報名未經核定者不得隨團活動。
 6. 曾有吸毒、犯罪前科或其他品行不佳者，不得報名。
 7. 觀摩團團（職）員應於出發前於當地辦妥個人醫療保險，觀摩期間如因疾病就醫治療，應自行負擔醫療費及返回居留地費用，團員及其家長不得向主辦單位（僑務委員會）或承辦單位提出任何要求。
- 四、活動應遵守事項：
 1. 如觀摩團團（職）員於活動期間發生任何意外事故，主辦單位及承辦單位僅就有故意過失部分負責。
 2. 觀摩團團（職）員在活動期間不接受輔導或不遵守規定事項，致發生意外事故應自行負責，主、承辦單位除有重大過失外，對該團（職）員不負任何賠償責任，如有任何爭議皆依中華民國法律處理。
 3. 團員攜帶行李應簡單輕便，不得攜帶任何違禁品及保育類動物製品。
 4. 請切實遵守中華民國海關規定，辦理行李通關手續，並請各籌組單位酌情統一製發大型顯明之標幟貼於團員行李上，以便管理，避免遺失。
 5. 請攜帶正式服裝、輕便夾克（在山區住宿，早晚較涼）及球鞋等，以應各種場合穿著。
 6. 請團員依活動規定日期抵臺及離臺，如因機位等因素必須提早或延後，停留期間一切費用自理。觀摩活動行程結束後，團員應即返回僑居地，不得以任何理由，或以僑生、留學生身分留臺升學或居留。
 7. 如因團員之違法行為或其它可歸責於團員之事由，致遭政府機關羈押或留置時，應由該團員自行負責，與主、承辦單位無涉，並應負責賠償本觀摩團活動主、承辦單位因此所受之一切損害。
 8. 團員須全程參加活動，不得私自離團，若有特殊情形必須提前離團者，應由家長出具申請書說明原因，由駐外館處或華僑文教服務中心轉送僑務委員會核準後，通知承辦單位依程序辦妥離團手續後方可離團。
 9. 團員於活動期間不接受輔導或不遵守規定事項，情節重大者，經查證屬實，僑務委員會得徑予退訓處理，團員及家長不得異議，且未來參與本活動須全額自費，僑務委員會將不予補助。

Admission Guidelines for 2018 Compatriot Youth Taiwan Study Tour

1. Objective of this Study Tour: To learn about Republic Of China (Taiwan) as well as to promote international youth exchange. This program will take three weeks.
2. Before you attend this Study Tour, you should attend the introductory seminar, so that after you arrive in Taiwan, you will have better understanding of the Study Tour as well as its rules and regulations.
3. Qualifications for Registration:
 - (1) The applicants must be overseas Compatriot youth between the ages of 15 and 25 (a copy of the passport is required) who are in good health and academic standing, currently live overseas, have high learning desire; and are willing to obey group regulations and disciplines as well as willing to take all of the courses.
 - (2) Expenses:
 - a. Registration fee: **NT\$12,000** is required for each participant. There will be no reimbursement of registration fee if participants leave during the Study Tour.
 - b. Participants are responsible for their own round trip airfares to and from Taipei, medical and travel insurance premiums, and personal expenses. However, the OCAC, Republic of China (Taiwan) will provide accommodations, meals, and transportation within Taiwan.

- (3) The applicants are required to submit 5 original passport-size pictures (1/2" or 2.54cm X 4cm) , a valid passport to Taiwan.
 - (4) Each applicant must be in good health (free of heart problems, cardio-vascular illness, diabetes, mental disorder, epilepsy, infectious disease, pregnancy and others that may cause serious symptoms) in order to participate in the Study Tour. Otherwise, participants are responsible for any accident occurred.
 - (5) Students who already have the approval from the government agency to study in Taiwan will not be allowed to attend this Study Tour. All applicants must receive approval from OCAC, otherwise the applicants will not be accepted to the Study Tour.
 - (6) Applicants who have criminal records or drug abuse problems will not be allowed to attend.
 - (7) Participants should buy medical insurance before leaving for Taiwan. If participants are sick and have to stay in the hospital during the Study Tour, they will have to pay their own medical and return expenses. Requests by parents for medical compensations from the OCAC and undertaking agency will not be accepted.
4. Rules and Regulations:
- (1) Tour sponsors are not responsible for any accidents during the period of tour except for any incident occurring as a result of negligence caused by tour activities.
 - (2) Participants are responsible for any accident caused by not following the advice, rules and regulations. The sponsors will not be held financially liable for any incidents except for the occurrence of significant negligence on the part of the Tour organizers. If any dispute occurs, the laws of Taiwan will prevail.
 - (3) Simple luggage is more appropriate. Contraband articles and endangered species products are prohibited.
 - (4) Follow the rules and regulations of the Customs; the respective committee should make special stickers / signs so that the participants may use them to avoid their luggage being lost.
 - (5) Please bring semi-formal attires with ties, shirts, and slacks for males, skirts and blouses for females, and light jackets for mountain areas, and sneakers for outdoor activities.
 - (6) All the participants must set their arrival and departure dates according to the study tour schedule. No changes will be allowed. For any changes in these schedules, study tour participants are responsible for all additional expenses. After the study tour ends, participants must return to their resident countries within the scheduled visa stay period.
 - (7) Any infractions of Taiwan's laws or evidence of contribution to such resulting in punitive actions by the R.O.C. government or law enforcement officials towards a tour participant will be left to that individual own responsibility. The tour organizers will not be held responsible for any such actions. Consequently, the tour sponsors may also request compensations for any inconveniences caused by this individual or situation.
 - (8) All participants must attend the whole tour according to the Study Tour schedule. No changes will be allowed. For any changes in the schedule due to certain special situations, participants must have parents' petition (with the explanation of changes) with the final approval from OCAC in order to leave.
 - (9) All applicants must follow the group regulations and guidance. For serious circumstances, under the true investigation from OCAC, the applicants will be withdrawn from the Study Tour, and the objection from applicants and parents will not be accepted, and applicants must pay all of related fees for joining this program in future.

研習同意書 ENROLLMENT AGREEMENT

本人保證以上所填資料均屬實且將遵守本活動各項生活輔導規定(詳如以下生活輔導標準表),若有違反,願接受處罰,倘如已達到離開本活動之規定,願自動放棄研習資格,立即離營,並不得要求退還已繳交之活動費用。此致

僑務委員會

As an applicant of the program, I certify that all of the above information provided is true to my knowledge and I am willing to observe and abide by all the regulations of the OCAC Compatriot Youth Taiwan Study Tour. I understand that if I violate these regulations as listed in the following demerit table, I will accept the corresponding demerit. Once I have reached the demerit limits, I will unconditionally forfeit the right to participate in the program and will depart immediately upon the request of OCAC , Republic of China (Taiwan) without requesting the reimbursement of the program fee.

學員簽名

Applicant's Signature: _____

家長簽名

Parent's (Guardian's) Signature: _____

日期

Date: _____

電話 Phone: _____

電傳 Fax: _____

住址 Home address: _____

注意事項 Notices:

一、研習同意書須有學員及家長之簽名始得認可，否則將無法辦理報到手續。

Participants without cosigned Enrollment Agreement by the parent will not be allowed to register.

二、茲為提高研習品質及維護學員安全，特訂定生活輔導標準表如下，請參加學員確實遵守。

In order to promote program quality and to maintain participants' safety, the OCAC will administer the following group regulations.

Behavior 事由	Frequency or Time Period 次數或時數	Punishment or Point deduction 處罰或扣分
Theft (You will be reported to the police.) (偷竊物品，移送法辦) Sleeping in the room of the opposite sex overnight. (在異性房間過夜) Severe fights will be reported to the police, and the payment for the damages or medical services must be made. (嚴重鬥毆送警法辦外，並須負賠償責任) Drug taking will be reported to the police. (吸毒者送警法辦)	Once 一次	Dismiss 退營
Being late for bed-check. (晚點名遲到)	One Hour 一小時	0.25
Sick leaves. (病假)		0.15
Leaving on personal matters. (事假)		0.25
Unexcused absence from activities. (無故不參加活動)		1
Being late for activities. (參加活動遲到) Leaving activities before dismissal. (參加活動早退) Playing with cell phones or iPads during class time. (上課把玩手机或平板電腦)	Once 一次	0.1
If you didn't fill out any permission forms for leaves, it will result in a point deduction. (未依規定填寫請假單)		0.5
Smoking in non-smoking areas. (在非吸煙區內抽煙) Being noisy after bed-check and failing to behave. (深夜吵鬧，不聽勸阻) Leaving the accommodation without permission after bed-check. (晚點名後不假外出) Putting up people who are not the program participants in your room. (帶外人進入住宿房間)		1
Drinking alcohol, gambling, fighting with others during program period. (在研習期間喝酒、賭博和打架) Damaging public properties. (You will have to compensate for the damaged property according to its price.) (破壞公物，另須照價賠償) Staying in the room of the opposite sex after bed-check. (晚點名後在異性房間逗留)		2
Staying overnight without filling in the Overnight Absence Form. (不假外宿)		4
Loudly playing music anytime. (音響音量過大) Playing with dangerous articles, i.e. air gun / toy gun / laser pen. (使用具危險性器材，如：空氣槍 / 玩具槍 / 雷射筆)		Confiscate the articles until the end of the term (沒收器材至離營時發還)
<div>1. Each participant starts with 15 discipline points. 每位學員報到時生活輔導總積分爲15分。</div> <div>2. If you behave well and have no deduction during a whole week, your discipline points will be added 0.5 point. 如整週表現良好且未扣分者，當週生輔成績加 0.5 分。</div> <div>3. If you need to ask for a leave, please report to the program staff or counselors in advance. All leave-asking procedures should be submitted in three days including the day you ask for a leave, otherwise you will be considered as having a leave without permission. 如需請假請事先告知各相關人員，所有請假手續須於請假當日起 3 日內辦理完成，否則皆以無故不參加活動論。</div> <div>4. If your discipline points are lower than 7 points, you will be required to leave the program immediately without reimbursement of the program fee. 研習期間生輔成績未達 7 分者必須離開本營隊，所繳交活動費用不予退還。</div> <div>5. If participants are caught stealing, fighting or gambling, the police may become involved at the discretion of the program organizer. 在營內或營外發生偷竊、打架或賭博等不良行爲，將視情況報警處理。</div>		

以下請勿填寫 (審核用) Please do not write below this line (FOR OFFICIAL USE ONLY)

審查單位	初審 (政府駐外館處或華僑文教服務中心)
審查意見	1. 申請人確實具備華裔身分? <input type="checkbox"/> 是 <input type="checkbox"/> 否 2. 送審證件及所填資料是否齊全、屬實? <input type="checkbox"/> 是 <input type="checkbox"/> 否 3. 曾否參加本活動? <input type="checkbox"/> 是 年 月 <input type="checkbox"/> 否
◎ 務請加蓋受理單位章戳或審查人印章	印鑒
審查日期	年 月 日

僑務委員會海外華裔青年臺灣觀摩團個人資料蒐集、處理及利用告知事項

OCAC disclosure regarding gathering, handling and using personal information of participants in the Program for Expatriate Youth Taiwan Study Tour

一、依據：個人資料保護法（以下簡稱「個資法」）第八條規定。

1. Pursuant to: Article 8 of the Personal Information Protection Act (hereafter “the Act”).

二、機關名稱：僑務委員會（以下簡稱「本會」）及受本會委托辦理本活動之單位。

2. Agency (name): The Overseas Community Affairs Council (hereafter “OCAC”), and the unit it assigns to carry out this activity.

三、蒐集之目的：

基於辦理本會海外華裔青年活動相關之招生、核錄、辦理保險等相關訊息發送之資(通)訊服務、學員聯繫、學員資料與資料庫管理、統計研究分析、學術研究及其他完成本會活動營務及僑務必要之工作，或經學員同意之目的。

3. Reasons for gathering information:

For performing necessary services when holding OCAC Overseas Chinese Youth activities, including enrollments, acceptance letters, insurance, and other matters; tasks involving student contact information and personal database management, statistical analysis, academic research, and other tasks required by the OCAC to run its activity and overseas community affairs; and other uses approved by the applicants.

四、個人資料之類別：

（一）辨識個人者 (C001)：中英文姓名、職稱、自傳、相片、住址、出生年月日、出生地、居住地區、通訊地址、電話、行動電話、傳真、電子郵件信箱等。

（二）辨識財務者 (C002)：保險單號碼。

（三）政府資料中之識別者 (C003)：身分證統一編號、護照號碼、保險憑證號碼及證照號碼等。

（四）個人描述 (C011)：出生年月、性別、國籍及居住地區等。

（五）身體描述 (C012)：身高、體重及血型等。

（六）習慣 (C013)：飲食習慣。

（七）家庭其他成員之細節 (C023)：家庭其他成員或親屬、父母、同居人及旅居國外及大陸人民親屬等。

（八）其他社會關係 (C024)：朋友、同事及其他除家庭以外之關係等。

（九）移民情形 (C033)：護照、工作許可文件、居留證明文件、移民資料、入境之條件及其他相關細節等。

（十）慈善機構或其他團體之會員資格 (C037)：僑團、僑社、僑商會會員。

（十一）職業 (C038)：職業、職稱。

（十二）現行之受雇情形 (C061)：雇主、工作描述、產業特性等。

（十三）健康紀錄 (C111)。

（十四）種族或血統來源 (C0113)。

4. Types of information gathered:

(1) For identifying the individual (C001): Chinese and English name, job title, autobiography, biography, photograph, date of birth, place of birth, place of residence, address, tel. no., mobile phone no., fax no., email address.

(2) For verifying financial information (C002): Insurance policy number.

(3) For identification in government documents (C003): ID card no., passport no., insurance certificate no., license no.

(4) Personal description (C011): Month and year of birth, sex, nationality and residence.

(5) Body description (C012): Height, weight and blood type.

(6) Habits (C013): Dietary habits.

(7) Information on other family members (C023): Family members, relatives, parents, common-law partners, and relatives living overseas or in Mainland China.

(8) Other social relationships (C024): Relationships with friends, colleagues and others outside the family.

(9) Immigration situation (C033): Passport, work permit, residence permit, immigration information, entry conditions and other related details.

(10) Membership of charity organizations or other groups (C037): Overseas Chinese groups, overseas Chinese chambers of commerce.

(11) Occupation (C038): job, position.

(12) Current employment situation (C061): employer, work description, characteristics of industry.

(13) Health records (C111).

(14) Race or ethnicity (C0113).

五、個人資料處理及利用：

（一）個人資料利用之期間：

自報名本會活動起至上開蒐集目的完成所需之期間為利用期間。

（二）個人資料利用之地區：

臺灣地區（中華民國境內）、當事人居住地或經當事人授權處理、利用之地區。

（三）個人資料利用之對象：

本會、本會駐外僑務秘書或駐外館處（協助本會遴薦參加人員及業務聯繫之必要情形下，利用本會提供之當事人個人資料）、本會業務委外之委辦廠商（本會活動委外合約業明訂委辦廠商得利用本會提供之參加人員個人資料時，應遵守個資法相關規定）及經本會同意得運用之學術研究單位、學者專家等。

(四) 個人資料利用之方式:

執行本會業務, 包括本會舉辦之各項活動如招生、錄取、保險、訂房、參訪、拜會機關等證明及相關訊息(寄)發送通知、當事人之聯絡、資料統計分析、辦理本會業務必要揭露、學術研究及其他等有助上開蒐集目的之必要方式。

5. Handling and use of personal information:

(1) Utilizing period:

From the time of application to the OCAC activity to the completion of the aforementioned information gathering.

(2) The region within which personal information will be used:

Taiwan (within the ROC), the place of residence of the party involved, or places where handling and use has been approved by the party involved.

(3) Users of personal information:

The OCAC, the OCAC's secretary office or embassy/consulate/representative office (personal information of the person involved can be provided to them by the OCAC when selecting participants or for contact purposes), suppliers contracted by the OCAC (the outsourcing contracts for OCAC activities clearly state that when a supplier needs to use the personal information of participants, the regulations of the Act must be obeyed), and research units and scholars and experts authorized by OCAC.

(4) Way of using:

Carrying out the OCAC's operations, such as sending enrollment forms, acceptance letters, insurance matters, room reservations, visiting organizations and other certificates, and sending of related information, contacting the person involved, statistical analysis, necessary disclosure of the OCAC's operations, academic research and other necessary methods for achieving the aforementioned collection objectives.

六、當事人得依個人資料保護法規定查詢或請求閱覽; 請求製給複製本; 請求補充或更正; 請求停止蒐集、處理或利用; 請求刪除。當事人得以書面與本會聯繫, 行使上述之權利。

6. In accordance with the Act, the person involved can inquire about the information or request to read it; they can ask for copies, and ask to cease the use and handling, and for deletion. The person involved can exercise the above rights by submitting a hard copy in writing with this request to the OCAC.

七、學員如未提供本會辦理活動所需之正確完整個人資料, 應註明正當充分之理由, 否則將無法進行報名手續並喪失享有活動後續服務之權益。

7. If an applicant does not provide complete and correct information for the OCAC to carry out this activity, he/she should fully state the reason for this. Otherwise, the application cannot be processed, and the applicant will lose the entitlement to subsequent services connected with the activity.

(Adult applicant 成年者)

本人 (Chinese Name) _____ (English Name:) _____

(Minor applicant 未成年)

本人 (Guardian's Chinese Name) _____ (English Name:) _____ 係

(Chinese Name) _____ (English Name:) _____ 之法定代理人

業已詳閱、瞭解且同意所附「海外華裔青年臺灣觀摩團個人資料蒐集、處理及利用告知事項」。

I have carefully read and understood the attached OCAC disclosure regarding the gathering, handling and using of personal information of participants in the Program for Expatriate Youth Taiwan Study Tour, and I hereby agree to it.

此致 To:

僑務委員會

OCAC

立書人 (已成年之報名者或未成年報名者之法定代理人):

Applicant (adult applicant or legal guardian of minor applicant)

_____ (Signature)

身分證字號 (ID or Passport No.):

Country: _____

Address: _____

Tel: _____

Date: _____



僑務委員會

編號:

OCAC, Republic of China (Taiwan)

海外華裔青年臺灣觀摩團健康證明檢查項目表

Items Required For Health Certificate

中文姓名: _____	檢查日期 Date of Examination 日(D) ____ 月(M) ____ 年(Y) ____	相片 Attach One Recent 1-inch Photo Here
Name in English: _____		
性別 Sex: <input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female	護照號碼 Passport No: _____	
出生年月日 Date of Birth: ____ / ____ / ____	國籍 Nationality: _____	

身體檢查 PHYSICAL EXAMINATION

- A. 身高 Height: _____ 公分 cm
B. 脈搏 Pulse: _____ 次 / 分 time / min
C. 血壓 Blood pressure: _____ / _____ 毫米汞柱 mm Hg
D. 心臟 Heart: ☐ 正常 Normal ☐ 異常 Abnormal
E. 體肢運動 Locomotors: ☐ 正常 Normal ☐ 異常 Abnormal
F. 疝氣 Hernia: ☐ 正常 Normal ☐ 異常 Abnormal
G. 體重 Weight: _____ 公斤 Kg / Lb
H. 視力 Vision: 右 Right _____ 左 Left _____

檢驗室檢查 LABORATORY EXAMINATIONS

® 未作本項目檢查者，將不予受理。【 Application missing this information will not be accepted. 】

- A. 胸部 X 光檢查肺結核 Chest X-Ray for Tuberculosis: ☐ 正常 Normal ☐ 異常 Abnormal
B. B 型肝炎表面抗原檢查 Hepatitis B Surface Antigen: ☐ 陽性 Positive ☐ 陰性 Negative

病史 MEDICAL HISTORY

* 您是否曾經感染下列疾病 Have you ever had the following diseases ?

- A. 心臟病 Heart disease: ☐ Yes ☐ No
B. 氣喘病 Asthma: ☐ Yes ☐ No
C. 高血壓 Hypertension: ☐ Yes ☐ No
D. 糖尿病 Diabetes: ☐ Yes ☐ No
E. 癲癇 Epilepsy: ☐ Yes ☐ No
F. 腎臟病 Kidney disease: ☐ Yes ☐ No
G. 瘧疾 Malaria: ☐ Yes ☐ No
H. 肝病 Liver Disease: ☐ Yes ☐ No

結論: 根據以上對 _____ 先生 / 小姐之檢查結果, 他 / 她 ☐ 是 ☐ 不是 合格的。

CONCLUSION: Above is the medical report of Mr. / Ms _____ He / She ☐ Is ☐ Is not fit.

醫院 (診所) 名稱、地址、電話

Hospital's or Clinic's Name, Address and Telephone

負責醫師簽章

Chief Physician: _____
(Name & Signature)

醫院負責人簽章

Superintendent: _____
(Name & Signature)

日期 Date: 日 (D) ____ 月 (M) ____ 年 (Y) 20 ____



redefining / standards

AXA Affin General Insurance Berhad (23820-W)

Ground Floor Wisma Boustead
71 Jalan Raja Chulan 50200 Kuala Lumpur

☎ (603) 2170 8282

☎ (603) 2031 7282

✉ customer.service@axa.com.my

🌐 www.axa.com.my

Proposal Form

SmartTraveller

GST Reg. No.:

Date:

IMPORTANT NOTES

- Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if You are applying for this Insurance wholly for purposes unrelated to Your trade, business or profession, You have a duty to take reasonable care not to make a misrepresentation in answering the questions in this Proposal Form. You must answer the questions in this Proposal Form fully and accurately.
Failure to take reasonable care in answering the questions may result in avoidance of Your contract of insurance, refusal or reduction of Your claim(s), change of terms or termination of Your contract of insurance.
The above duty of disclosure shall continue until the time Your contract of insurance is entered into, varied or renewed with Us.
In addition to answering the questions in this Proposal Form, You are required to disclose any other matter that You know to be relevant to Our decision in accepting the risks and determining the rates and terms to be applied.
You also have a duty to tell Us immediately if at any time after Your contract of insurance has been entered into, varied or renewed with Us any of the information given in this Proposal Form is inaccurate or has changed.
- The personal data submitted by and collected from You may be used by Us and/or any company within the AXA Group of companies and/or any of its associated companies, within or outside Malaysia, for administration or direct marketing purposes and in this connection, We may transfer or disclose that information to any of those other companies. We will cease to use the Personal Data for direct marketing purposes if You request Us to do so. For further details, please refer to Our "Data Privacy Notice" stipulated in our website.
- Family Plan includes You, Your spouse and all Your children accompanying You.
- Cash/Cheque/Credit card payment must accompany this application.
- Proof of Purchase/Bills/Documentary Evidence is required for all claims.
- Any extension of cover is not allowed during the trip or after You have departed for Your destination.
- Maximum age of applicant is below 80 years old.
- Premium charged for this Policy exclude tax(es) that would be imposed in the future (including Goods and Services Tax ("GST")) and from time to time, We will be entitled to recover from You any GST or other taxes that We are required by law to collect. For avoidance of doubt, GST on a pro-rata basis will be chargeable for any period of insurance that falls on or after the implementation date of GST, as applicable.

All questions must be fully answered - ticks and dashes will not suffice. Please write in block letters and tick (✓) as appropriate.

A. PARTICULARS OF PERSON TO BE INSURED/INSURANCE REQUIREMENT

Name of Insured Person*	Choice of Benefit		Choice of Plan		New NRIC No. * /Passport No.	Date of Birth*	Age	Sex*	Marital Status*	Nationality*	Premium (RM)
	VIP	Classic	Individual	Family							
1											
2											
3											
4											
5											
(If space is limited, kindly attach a separate sheet)											Add Tax
											Total Premium

Address of first named Insured Person*:

Postcode*:

Tel. (Office):

Tel. (Home):

Tel. (Mobile)*:

Email*:

Private Use: ☐ Yes ☐ No

Collective Agreement/SOCSO/Workmen Compensation Agreement: ☐ Yes ☐ No

*Required fields

B. TRAVEL INFORMATION & PERIOD OF INSURANCE

A journey shall include return to Malaysia during the Period of Insurance except for 'One-way' travel.

One-way Travel: <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Travel: <input type="checkbox"/> Business <input type="checkbox"/> Leisure/Social
Period of Travel: From dd/mm/yy To dd/mm/yy	Length of Trip: (both days included)
Furthest country you are travelling to:	
Please tick the area of the furthest country you are travelling to.	
Area of Travel: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	

STTR/PR (01/16)

C. NOMINATION

I/We hereby nominate the following as my/our nominee(s). (Please nominate according to the numbering order of Part A)

Name of Nominee	Address	New NRIC No.	Relationship
1			
2			
3			
4			
5			

Name of Witness: _____

Signature of Witness: _____

(Witness must be aged 18 or above and is not a named nominee under the same policy. (In accordance with subparagraph 2(3) of Schedule 10 of the FSA.))

- I. In accordance to Paragraph 5, Section 10 of the Financial Services Act 2013 ("the FSA"), Malaysia, nominee(s) should be: spouse, child or parent(s) if there is no spouse or child at the time of making this nomination.
- II. In accordance to Paragraph 6(2), Schedule 10 of the FSA, Malaysia, a nominee of a Muslim insured upon receipt of policy moneys shall distribute the policy moneys in accordance with the Islamic law.

D. DECLARATION

I/We hereby declare that the above answers and statements are true, and that I/we have withheld no information whatever regarding this application.

I/We understand that it is my/our duty to take reasonable care not to make a misrepresentation in answering the questions in this Proposal Form and I/we hereby declare that I/we have fully and accurately answered the questions above.

Signature of Proposer: _____

Date: _____

For agents/representative use

Name: _____

Account No.: _____