

國立臺灣科技大學 新進人員一般體格檢查說明

(111.07.15 版本)

為健全及落實本校健康管理與促進工作，依據本校「國立臺灣科技大學健康檢查實施計畫」規定，教職員工進入本校工作時需做一般健康檢查，使能瞭解員工健康狀況，適當調整分配工作，據以評估作業場所之危害性，早期改善作業環境。

一、實施依據：

依據職業安全衛生法第 20 條暨勞工健康保護規則規定，新進教職員工須於到職前完成體格檢查，「非繼續性之臨時性或短期性工作，且其工作期間在六個月以內」者可免實施。

※ 「續聘者」若未中斷聘僱，需從「第一次被聘僱之到職日期」開始計算至「本次聘僱結束日期」。
月計算器：<https://reurl.cc/x9dEDz>



二、參加對象：

本校新進教職員工(公務員、約用人員、博士後研究員、專任助理及技工工友)。

三、體檢報告繳交方式：

需要在報到前完成體格檢查，並於報到當天繳交體檢報告至環安室(國際大樓 11 樓 1121 室)。

四、體檢報告應繳內容：(詳見臺科大環安室網頁說明)

1. 臺科大新進人員承諾體檢同意書。
2. 臺灣科技大學新進人員體格檢查問卷。
3. 符合法規之體檢報告正本(核對用)及影本(繳交)。

※ 詳細內容及單張請至學校網頁查看及下載：

臺科大首頁/環安室/業務專區/健康檢查&健康諮詢預約/新進人員體格檢查專區

<https://reurl.cc/8ozAWR>



◆ 備註：

1. 若您有任何體檢資料相關問題，可洽您的體檢機構諮詢。
2. 本校新進人員體檢收集單位為環安室，可洽林其愛護理師，(02)2730-3763。
3. 各醫院體檢作業皆須 7-30 個工作日，敬請提早作業時間，以免影響當日報到完成之權益。

務必儘速繳交體格檢查報告!

以維護自身健康及完成法定勞工義務的規定(職業安全衛生法第 20 條)。

違反規定者，處新臺幣三千元以下罰鍰(職業安全衛生法第 46 條)。

未於期限內繳交者將通知單位主管!

謝謝配合!

國立臺灣科技大學(以下簡稱臺科大) 新進人員體格檢查同意書

NTUST New Employees Physical Examination Consent Form


本人瞭解臺科大依「職業安全衛生法第 20 條」規定，應於到職日完成繳交新進人員一般體格檢查或特殊體格檢查報告，並同意將本人所繳交之個人資料、法定及非法定體檢資料，提供本校環安室保存及辦理健康管理業務之用。所繳交資料如有不實，或未能於規定期限完成繳送，除有不可抗力之正當理由外，願意自負法律責任及接受本校相關規定之處理。若檢查結果有校園防治傳染病安全理由，願遵照醫療機構體檢建議，做進一步檢查或就醫，並配合後續追蹤事宜。當您於頁末簽名處簽署本同意書時，表示您已閱讀、瞭解並同意接受本同意書之所有內容。

I understand that according to the Article 20 of the Occupational Safety and Health Act, I should complete the submission of the general physical examination or special physical examination report at first day of registration, and agree to provide personal data, statutory and non-legal medical examination data to the Office of Environmental Safety for preservation and health management. Without any proper justification, If the submitted report is false, or not handed on time, I am willing to accept the administrative sanction and legal liability. If the examination results concern the control of communicable diseases on campus, I agree to adhere to the recommendations of the medical institution to do further examinations or treatments, and I will completely cooperate in subsequent monitoring. **Your signature below indicates that you have read, understood and accepted the contents set forth in this agreement.**

※ 「非繼續性之臨時性或短期性工作，且其工作期間在六個月以內」者可免實施。

"Temporary or short-term work that is not continuous, and the working period is within six months" can be excluded from implementation.

★ 請以正楷填寫下列資訊 Please fill in a form neatly ★

在本校是否將從事「特別危害健康作業」? Will I be engaged in <u>Special Hazardous Working</u> in this school?	➡ (詳見網頁連結 scan the QR code below to read the information in detail.) https://reurl.cc/9rg1Ma 
<input type="checkbox"/> 是 YES，類別 Intem: _____ (請進行該項特殊體格檢查) <input type="checkbox"/> 否 NO	

姓名 Name : _____	單位分機 Unit extension : _____
服務單位 Department : _____	手機 cell phone number : _____
職稱 Position : _____	出生日期 Date of birth(西元) ____/____/____
身分證字號(或護照) ID or passport number : _____	
電子郵件 E-mail : _____	
用人單位主管資訊 Unit supervisor related information	
● 姓名 Name: _____	
● 單位分機 Unit extension : _____	
● 電子郵件 E-mail : _____	
到職日 Due date : ____/____/____	
本次聘僱到期日 Expiry date of this employment : ____/____/____ ; <input type="checkbox"/> 無 None	
您是否為本校續約人員? Did you renew your contract with this school for this job?	
<input type="checkbox"/> 是 YES，前次約聘期間 Employment period : ____/____/____/____ - ____/____/____	
<input type="checkbox"/> 否 NO	
立同意書人 Name : _____ (簽章)	
立同意書日期 Date: ____年(Year) ____月(Month) ____日(Day)	

新進人員安全衛生教育訓練報到須知

法規依據：消防法施行細則第 15 條及職業安全衛生法第 32 條辦理相關訓練。新進人員至少應完成 3 小時安全衛生教育訓練；操作化學品者另增加 3 小時，請參閱環安室公告。如另有發函或大宗郵件通知，依通知連結說明辦理報名。

職前訓練實施方法：

1. 完成期限：到職 3 個月內完成訓練。
2. 繳交新進人員安全衛生承諾書：3 個月內完成後簽署繳回環安室備查(可隨繳交體檢報告時一併交回)。
3. 教育訓練實施方式請 2 擇 1:
 - (1) 線上報名校級訓練：實體課程至少 1 小時，數位學習至多 2 小時，上課方式請查閱環安室網站，如教育訓練說明專區。
 - (2) 主管(或計畫主持人)自行實施法定安全衛生教育訓練 3 小時，並由主管(或計畫主持人)親筆簽名確認(於安全衛生承諾書簽名確認)。
4. 若報到時無合適實體課程，請參閱課程說明於到職一個月內先完成數位學習課程 2 小時，將完成之訓練紀錄寄至承辦人信箱(amandayu@mail.ntust.edu.tw)。
5. 每季檢視新進人員是否已完成教育訓練及體格檢查送環安委員會報告及未完成人員會另發函提醒。敬請於公告日期完成訓練及依規定繳交體格檢查報告。

Information and Notes (教育訓練說明)

中文專區



<https://she.ntust.edu.tw/p/405-1068-87509,c8625.php?Lang=zh-tw>

國立臺灣科技大學環境保護暨安全衛生室公告 (111.6.7 版本)


國立臺灣科技大學(以下簡稱臺科大) 新進人員體格檢查同意書

NTUST New Employees Physical Examination Consent Form

本人瞭解臺科大依「職業安全衛生法第 20 條」規定，應於到職日完成繳交新進人員一般體格檢查或特殊體格檢查報告，並同意將本人所繳交之個人資料、法定及非法定體檢資料，提供本校環安室保存及辦理健康管理業務之用。所繳交資料如有不實，或未能於規定期限完成繳送，除有不可抗力之正當理由外，願意自負法律責任及接受本校相關規定之處理。若檢查結果有校園防治傳染病安全理由，願遵照醫療機構體檢建議，做進一步檢查或就醫，並配合後續追蹤事宜。當您於頁末簽名處簽署本同意書時，表示您已閱讀、瞭解並同意接受本同意書之所有內容。(為避免體檢報告資料疏漏，本同意書請與您的體檢報告、教職員工健康檢查問卷一併繳交)。

I understand that according to the Article 20 of the Occupational Safety and Health Act, I should complete the submission of the general physical examination or special physical examination report at first day of registration, and agree to provide personal data, statutory and non-legal medical examination data to the Office of Environmental Safety for preservation and health management. Without any proper justification, If the submitted report is false, or not handed on time, I am willing to accept the administrative sanction and legal liability. If the examination results concern the control of communicable diseases on campus, I agree to adhere to the recommendations of the medical institution to do further examinations or treatments, and I will completely cooperate in subsequent monitoring. **Your signature below indicates that you have read, understood and accepted the contents set forth in this agreement. (Please submit this consent form together with your Physical Examination Report and Physical Health Questionnaire.)**

★ 請以正楷填寫下列資訊 Please fill in a form neatly ★

在本校是否將從事「特別危害健康作業」？ Will I be engaged in <u>Special Hazardous Working</u> in this school? (詳見網頁連結 scan the QR code below to read the information in detail.) https://reurl.cc/9rg1Ma 	<input type="checkbox"/> 是 YES，類別 Item: _____ (請進行該項 <u>特殊體格檢查</u>) <input type="checkbox"/> 否 NO
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姓名 Name : _____	單位分機 Unit extension : _____
服務單位 Department : _____	手機 cell phone number : _____
職稱 Position : _____	出生日期 Date of birth(西元) ____/____/____

身分證字號(或護照) ID or passport number : _____

電子郵件 E-mail : _____

用人單位主管資訊 Unit supervisor related information

- 姓名 Name: _____
- 單位分機 Unit extension : _____
- 電子郵件 E-mail : _____

到職日 Due date : ____/____/____

本次聘僱到期日 Expiry date of this employment : ____/____/____ ; 無 None

您是否為本校續約人員? Did you renew your contract with this school for this job?

是 YES，前次約聘期間 Employment period : ____/____/____/ - ____/____/____

否 NO

立同意書人 Name : _____ (簽章)

立同意書日期 Date: ____年(Year) ____月(Month) ____日(Day)

國立臺灣科技大學新進人員安全衛生承諾書

單位：_____ 姓名：_____ 職稱：_____ 到職日：_____

用人單位主管或計畫主持人姓名(無則免填)：_____

手機或分機：_____ e-mail: _____

第一部分、本校教職員工安全衛生義務與責任

1. 接受安全衛生教育訓練。
2. 定期接受健康檢查,若從事特別危害健康作業,每年接受特殊健康檢查。
3. 發生意外事故時,依本校流程通報校安中心(0800695995或02-2733-2886)及工作場所負責人,若發生重大職業災害:死亡、住院、罹災人數 3 人以上,應於 8 小時內通報環安室(分機1010)。
4. 遵守本校安全衛生工作守則、其他安全衛生作業規範(如自動檢查、採購、承攬、健康保護計畫等)及相關行政指導。
5. 參與各項安全衛生活動,提供相關建議。

第二部份、新進人員職前訓練與相關作業資格

請用人單位主管(或計畫主持人)決定新進人員職前訓練實施方式,勾選作業內容、資格。

1. 法定基本職前訓練 3 小時實施方式(必填,二擇一)

用人單位主管(或計畫主持人)已於新進人員開始工作前實施訓練完畢,並留存訓練紀錄至少 3 年備查。

◆ 由主管或計畫主持人進行實體訓練3小時

訓練日期：_____ 訓練講師簽名：_____

新進人員參加環安室辦理之一般安全衛生實體或數位課程：

- (1)已完成數位學習訓練(至多 2 小時),已寄給環安室備查。
- (2)已從環安室網頁報名校級實體訓練(至少 1 小時),會完成。(到職 3 個月內完成)
- (3)到職前 3 年內已參加過環安室訓練 3 小時並有紀錄,已電話或 mail 通知環安室確認。
- (4)確認新進人員已完成前述課程後,至環安室繳交安全承諾書備查。

(二)新進人員的作業內容包含法定增列職前訓練時數項目(必填),教材可參考環安室網頁

使用化學品(必填,二擇一)

1.已由用人單位主管(或計畫主持人)實施 3 小時相關教育訓練。

◆ 由主管或計畫主持人進行實體訓練3小時

訓練日期：_____ 訓練講師簽名：_____

2.新進人員參加環安室辦理之化學品危害通識實體或數位課程：

- (1)已完成數位學習訓練方式完成至多 2 小時寄給環安室備查。
- (2)已從環安室網頁報名校級實體訓練(至少 1 小時),會完成。(到職 3 個月內完成)
- (3)到職前 3 年內已參加過環安室訓練 3 小時並有紀錄,已電話或 mail 通知環安室確認。

其他法定訓練(請參考環安室網頁說明)另實施 3 小時相關教育訓練。(勾選為到職交接時確認應訓練,日後將由環安室或系所單位安排訓練,若皆無,請勾選無前兩項)

應訓練之名稱：_____

無前兩項。

(三)新進人員操作危險性機械設備或法定特殊作業,具備法定資格/證照。(勾選為到職交接時確認應訓練,日後將由環安室或系所單位安排訓練,若皆無,請勾選無前兩項)

游離輻射設備操作 18 小時訓練(管理設備人員必要)及其他特化作業主管(使用特殊化學品實驗室新負責人必要)

危險性機械設備:固定式起重機及其他

無前兩項。

第三部份、本人已充分了解上述內容,並已閱讀本校安全衛生工作守則

(<https://reurl.cc/3o4ZqV>),及承諾確實遵守,若日後有違反情形,願承擔相關法律責任。

簽名：_____ 日期：_____

NTUST General Physical Examination Instruction for New Staff

(111.07.15 版本)

To improve and implement the school's health management and promotion work, and to further understand and care for the associates' health, as stipulated by the school's "Health Examination Implementation Measure", faculty and administrative employees are required to undergo general health examination when joining the school to work in anticipation to discover physical deficiency as early and to undergo further treatment in a bid to maintain and excel campus health.

1. According to Article 20 of the Occupational Safety and Health Act, the employers shall conduct pre-employment physical examinations for laborers at the time of employment. The laborers are obligated to accept the examinations. **"Temporary or short-term work that is not continuous, and the working period is within six months" can be excluded from implementation.**

※ If you are listed as school's continuing hire, working period must be counted from the "first day of employment when you first join school to work" to the "end date of the current employment".

※ Monthly Calculator: <https://reurl.cc/x9dEDz>



2. Object: All new employees at NTUST

3. Submission Methods of Physical Examination Report: New staff need to complete the health examination prior to your first day of work and submit to the **Office of Environment and Safety which is located in room IB-1121.**

4. Submission Content of Physical Examination Report:

- A. NTUST New Employees Physical Examination Consent Form
- B. NTUST New Employees Physical Health Questionnaire
- C. A Statutory physical examination report (Original copy for audit and photocopy for submission).

※ For details and forms, please download from the school website:
<https://reurl.cc/OADVY3>



*Note:

1. If you have any questions about your physical examination report, please contact the person at the clinic.
2. The physical examination report should submit to the Office of Environment and Safety. (contact person: Miss Kuo, E-mail address: G10926@mail.ntust.edu.tw)
3. The health examination process for medical centers take from 7-30 working days, so it is recommended to complete the health exam in advance.

- ※ **Please complete it as soon as possible to avoid penalty.**
- ※ **Violation of Article 20 of the Occupational Safety and Health Act will result in a fine of no more than NT\$3000.**
- ※ **We will report to the unit superior when the report is not submitted in time.**

Thanks for your cooperation!

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<input type="checkbox"/> 是 YES，類別 Item: _____ (請進行該項特殊體格檢查) <input type="checkbox"/> 否 NO	

姓名 Name: _____	單位分機 Unit extension: _____
服務單位 Department: _____	手機 cell phone number: _____
職稱 Position: _____	出生日期 Date of birth(西元) ____/____/____
身分證字號(或護照) ID or passport number: _____	
電子郵件 E-mail: _____	
用人單位主管資訊 Unit supervisor related information	
● 姓名 Name: _____	
● 單位分機 Unit extension: _____	
● 電子郵件 E-mail: _____	
到職日 Due date: ____/____/____	
本次聘僱到期日 Expiry date of this employment: ____/____/____; <input type="checkbox"/> 無 None	
您是否為本校續約人員? Did you renew your contract with this school for this job?	
<input type="checkbox"/> 是 YES，前次約聘期間 Employment period: ____/____/____/ - ____/____/____	
<input type="checkbox"/> 否 NO	
立同意書人 Name: _____ (簽章)	
立同意書日期 Date: ____年(Year) ____月(Month) ____日(Day)	

Information of Safety Training Course for New Worker

1. Curriculum Goals

The aim of this training course is to enhance the new workers' laboratory knowledge including occupational safety and health knowledge, potential risks and hazards and preventing personnel from accidents.

2. Topic : Introduction of Safety and Hygiene Management in Labs.

3. The members including new bachelor, master or PhD students and researchers who will access to the laboratory must attend this course.

4. According to the regulations of Occupational Safety and Health Act., the new employees should complete at least 3 hours of safety and hygiene training courses.

Registration Information and Notes :

Information and Notes (Please choose one of the two trainings to complete)	
<p>英文專區(Education Training)</p>  <p>https://she.ntust.edu.tw/p/412-1068-8625.php?Lang=en</p>	<p>數位學習專區(<u>video</u> courses)</p>  <p>https://reurl.cc/QLmxxq</p>

Contact : Miss Chieh-Ju Yu, E-mail address: amandayu@mail.ntust.edu.tw

NTUST New Employee Training and the Work Rules confirm Form

Department: _____ Name: _____ Position : _____ Due date: _____

Supervisor or Program Moderator Name : _____

Phone number : _____ e-mail: _____

Part One : Safety and Health Obligations and Responsibilities of Faculty and Staff

1. Participate in safety and health education training.
2. Carry out health checks at legally prescribed periods.
3. Comply with our school safety and health work rules and other work practices.
4. When emergency response, please inform Lab.Director or Campus Security Center (0800695995 或 02-2733-2886) of incident

Part Two : Pre-employment training for new employee

1. According to the regulations of Occupational Safety and Health Act., the new employees should complete at least 3 hours of safety and hygiene training courses.

Registration Information and Notes :

Information and Notes (Please choose one of the two trainings to complete)

英文專區(Education Training)



Registration Information

<https://she.ntust.edu.tw/p/412-1068-8625.php?Lang=en>

數位學習專區(video courses)



<https://reurl.cc/QLmxxq>

使用數位學習 3 小時訓練，請由用人單位主管 (計畫主持人)另參考環安室訓練講義簡易說明校內規定以代替法定實體訓練,並請訓練講師簽名確認訓練完成日期。

Use the video course to training, please your supervisor or program moderator signature the training date and name.

Training Date : _____ 實體訓練 3 小時

Teacher Signature : _____

Contact : Miss Chieh-Ju Yu, E-mail address: amandayu@mail.ntust.edu.tw

Part Three : Read our school safety and health work rules(<https://reurl.cc/VD7goQ>)

I have read the school's safety and health work rules, and promise to abide by it. If there is any violation in the future, I am willing to bear the relevant legal responsibility.

Signature: _____ Date: _____