

國立臺灣大學校聘人員復職報到作業單

National Taiwan University Contract Employee Reinstatement Reporting Form

本人經奉准於____年____月____日復職。

I have been authorized to reinstate to my duties on ____ year ____ month ____ date.

任職單位 Service Unit:

職稱 Job Title:

姓名 Name:

填單日期 Filling Date: ____年(Year) ____月(Month) ____日(Date)

單位主管簽章 Unit Director's Signature:

此致

人事室

Submit to the Personnel Department

序號 No.	應辦事項 Matter	承辦組別 Handling Division	承辦人簽章 Processing Clerk's Signature
1	復職登記 Reinstatement registration	人事室 行政人力組 The Administrative Personnel Division of the Personnel Department	
2	簽到 Sign-in	人事室 考訓組 The Assessment Division of the Personnel Department	
3	勞、健保及勞退金自提比例 (請檢附勞工保險被保險人退伍、復 職通知書) Labor, health insurance, and labor pension self-contribution ratios (Please attach the Labor Insurance Notice of Discharge or Reinstatement for the Insured Employee)	人事室 綜合業務組 The Integrated Affairs Division of the Personnel Department	
備註 Notice	1. 請復職同仁至遲於復職當日辦妥本作業單應辦事項。 Employees reinstating to the duty are required to complete all items on this form by the reinstatement date. 2. 本單辦畢後請送至人事室退撫保險組留存。 Please submit this form to the Retirement, Pension and Insurance Division of the Personnel Department for filing.		