

注意事項七) Receipt of application fee (see notice 7)	劃撥收據號碼(8碼)或交易序號(9碼) Receipt No. (8 digits) or transaction No.(9 digits)																		
<input type="checkbox"/> 招募許可函文號(有附則免填, 填表說明注意事項八) Recruitment permit number (see notice 8)																			
<input type="checkbox"/> 原聘僱或接續聘僱許可函文號 (有附則免填, 填表說明注意事項九) (Consecutive) employment permit number (see notice 9)																			
原廢止聘僱許可或不予許可函文號(除三方合意外均須填寫, 填表說明注意事項十) 或因疫情未能出國經本部同意轉出函文號(有附則免填, 填表說明注意事項十一) Case number of the original employer's revocation or rejection of employment permit. (Not required for three-party consent to consecutive employment, see notice 10) Or the approval letter number of transfer issued by the Ministry of Labor for that the foreigner cannot go abroad due to the pandemic. (see notice 11)																			
外國人工作地址 (請擇一勾選, 填表說明注意事項四) work address (Choose one, see notice 4)		<input type="checkbox"/> 同招募許可函 same as stated in the recruitment permit <input type="checkbox"/> 為第3地(需檢附被看護者居住證明文件) Other address (proof of the care recipient's residence is required.)																	
就業安定費帳單寄送地址 (請擇一勾選) Mailing address for employment security fees bill (Choose one)		<input type="checkbox"/> 同外國人工作地址 same as the work address <input type="checkbox"/> 其他地址(需檢附證明文件) Other address (documentary proof is required.)																	
接續聘僱通報證明書序號(有附則免填, 填表說明注意事項十二) Number of the certificate on notifying consecutive employment of the foreigner (see notice 12)																			
聘前講習證明序號(有附則免填, 第一次擔任雇主者需填寫, 填表說明注意事項十三) Certificate number of the employer training session (Required for first time employer, see notice 13)																			
聘前講習上課者之配偶或被看護者之配偶身分證字號(聘前講習上課者與被看護者為婆媳、翁婿等關係時始需填寫, 填表說明注意事項六) ID number of the spouse of the care recipient or ID number of the spouse of the employer training session taker. (see notice 6)																			

<p>非持招募許可函 Without recruitment permit</p>	<p><input type="checkbox"/>1. 雇主國民身分證影本。 ID certificate of the employer</p> <p><input type="checkbox"/>2. 「申請聘僱外籍看護工基本資料傳遞單」之申請人，與申請接續聘僱外籍家庭看護工之申請人不同，須檢附切結書正本（切結事項一）。 the original affidavit is required, the applicants of “basic information transfer form of hiring foreign Caregivers” are different from the applicants of consecutive employment of in-home caregivers (as affidavit 1).</p> <p><input type="checkbox"/>3. 雇主及被看護者之共同居住證明正本（外國人工作地址為第 3 地須檢附）。 Proof of residing together of the employer and the care recipient (required if the work address is other address)</p> <p><input type="checkbox"/>4. 被看護者在我國無親屬關係切結書正本（雇主與被看護者無親屬關係申請者須檢附）。 An affidavit stating that the care recipient has no relatives in Taiwan. (Required if the employer and the care recipient have no relative relationship.)</p> <p><input type="checkbox"/>5. 外國人聘僱與管理委託書正本及受委託人身分證明文件影本（以被看護者為雇主申請者須檢附）。 An original authorization letter for employing and administering foreigners, a photocopy of identification card numbers of the entrusted person. (Required when the care recipient is as the employer.)</p> <p><input type="checkbox"/>6. 原雇主放棄名額切結書正本（原雇主聘僱外國人，因前任外國人出國、死亡或行蹤不明，且被看護者具有遞補資格，新雇主須檢附原雇主簽署放棄名額切結書，切結事項二） Proof of affidavit from original employer to renounce the quota (the original employer hired the foreigner, the previous foreigner gone abroad, the missing or dead, while the care recipient is still eligible for substitution, the new employer must provide this affidavit as affidavit 2)</p> <p><input type="checkbox"/>7. 外國人入國工作前應經中央衛生主管機關認可之外國人健康檢查醫院或其本國勞工部門指定之訓練單位合格證明文件正本及該證明文件雙語認證之證明文件正本（其他工作類別外國人轉換看護工或家庭幫傭應檢附，外國人曾在中華民國境內從事看護工或家庭幫傭工作滿 6 個月以上者，免附）。 Before entering Taiwan, foreigners must verify Proof in the foreign health examination hospitals approved by Central Competent Health Authority of the Republic of China or the original certification of the training unit designated by the labor department of their countries. Bilingual authentication of that proof is also required. (Required of foreigners transferring from other categories of job; NOT required of those who have been working in the Republic of China as caregivers or housemaids for over six months.)</p> <p><input type="checkbox"/>8. 被看護者之身心障礙證明影本（未曾聘僱外籍家庭看護工或中階技術家庭看護工，且以被看護者肢體障礙重度或罕見疾病重度提出申請者，須加附註記有巴金森氏症、肌萎縮性側索硬化症或運動神經元疾病之診斷證明書或身心障礙鑑定表影本）。 Certificate of physical or mental disability of the care recipient (Applicants who have never hired foreign as in-home caregivers or intermediate skilled caregivers, and apply with the conditions of severe physical disabilities or rare diseases of the care recipients must attach a photocopy of the diagnosis certificate, Amyotrophic lateral sclerosis, identification for Parkinson's disease or motor neuron disease).</p>
	<p>其他應備文件： Other required documents:</p> <p><input type="checkbox"/>1. 雙方或三方合意接續聘僱證明書正本（經公立就業服務機構接續聘僱者免附） Two-party or three-party agreement on consecutive employment. (Not required for public employment service institution)</p> <p><input type="checkbox"/>2. 原雇主之被看護者死亡證明影本（新任外國人轉出原因為被看護者死亡須檢附，填表說明注意事項十） Care recipient's death certificate from the original employer (Required if the reason of transfer of the new foreigner is due to the death of the care recipient, see notice 10.)</p>

同意外國人代雇主申請聘僱許可切結書**Authorization letter**

雇主 (身分證字號:) 同意由本案外國人 (護照號碼:) 代為申請聘僱許可, 並聲明本申請案所填寫資料及檢附文件等均屬實, 如有虛偽, 願負法律上之一切責任。

The employer (ID number:) authorize the foreigner in this application (Passport number:) to apply for the employment permit on my behalf. I hereby declare the information and documents provided to be true, and confirm with full legal responsibility for any perjuries found.

雇主: (簽名)

Employer (Signature)

雇主市內電話: 雇主行動電話:

Employer's landline phone number Employer's mobile number:

雇主電子郵件:

Employer's e-mail

※以上3項聯絡資訊, 請確實填寫, 雇主應依規定就市內電話或行動電話擇一填寫提供雇主本人或可聯繫至雇主之親友電話, 如未確實填寫雇主聯絡電話, 將不予核發許可。另聯絡資訊將作為本機關即時聯繫說明申請案件審查情形及後續聘僱管理注意事項之用, 以利縮短案件審查時間, 與保障雇主聘僱外國人之權益!

Please fill in the three contact methods above. According to the regulations, the employer needs to provide either a mobile or landline phone number at which the employer (or a contact person) can be reached. If the contact information of the employer is not provided, the Ministry of Labor will not issue the permit. The contact information will be used for the authority when needed (to inform the status of the application or attentive matters). To shorten the processing time and guarantee the rights and benefits of the employers in hiring foreigners, please fill in the form properly.

中 華 民 國 年 月 日
Year Month Day

申請至 14 年評點 For accumulated working period to be 14 years <input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No (請擇一勾選) (tick Yes or No)	<input type="checkbox"/> 雇主聘僱外籍家庭看護工之工作期間累計至 14 年之評點申請書正本及相關文件。 (外國人累計在臺工作期間詳參填表說明注意事項十四) The assessment table and related documents for the foreigner as in-home caregivers's accumulated working period to be 14 years. (Accumulated working period, see notice 14)
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(以下虛線範圍為機關收文專用區) (Document Reception Use Only)

收文章: Receipt Stamp	收文號: Case Number
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切結事項:**Affidavit****一、變更申請人切結書:****Affidavit 1 - a change of applicant**

本人 (身分證字號:) 為「申請聘僱外籍看護工基本資料傳遞單」之申請人, 與申請接續聘僱外籍家庭看護工之申請人不同, 本人願放棄「申請聘僱外籍看護工基本資料傳遞單」申請人資格, 變更由 君 (身分證字號:) 當申請人。

I, (ID number:), am the applicant of the "basic information transmission form for hiring foreign caregivers", yet not the applicant of consecutive employment or the foreign as an in-home caregiver. I hereby to renounce the status of the applicant of the "basic information transmission form for hiring foreign caregiver" to (ID number:).

原申請人: (簽章) 新申請人: (簽章)

Original applicant: (signature)

New applicant: (signature)

二、放棄名額切結書

Affidavit 2 - renounce the quota

具切結書人 (身分證字號：) 在此切結事項如下：

☐切結放棄曾聘僱 ☐家庭看護工 ☐家庭幫傭 (護照號碼：) 1 名之聘僱該外國人名額。

☐切結放棄以 年 月 日勞動發事字第 號函核准招募許可函引進外國人效力。
(持招募許可函接續聘僱者勿填)

I, (ID number:), hereby confirm to

☐renounce the quota of employed foreigner (nationality: , passport number:), who is ☐ in-home caregivers ☐housemaid.

☐renounce the validity of the recruitment permit (permit number , y m d) to introduce foreigner. (Leave it blank if you apply for consecutive employment with a recruitment permit.)

切 結 人：

(簽章) 聯 絡 電 話：

Promisor: (signature) Contact number:

中 華 民 國 年 月 日。

Year

Month

Day

三、代雇主參加聘前講習切結書

Affidavit 3 - Attending the orientation on behalf of the employer

代參加講習人員姓名： (身分證字號：) 與被看護者〈或被照顧者〉具規定之親屬關係： (請填寫如父母、子女...等)，且具與被看護者〈或被照顧者〉共同居住或代雇主對外國人行使管理監督地位，特此切結。

I (ID number:), the person attending the orientation on behalf of the employer, has one of the relationship with the care recipient as stated in the regulation: (such as father, mother, son, daughter, etc.) and am cohabited relative of the care recipient or am exercising the management and supervision over the foreign worker on behalf of the employer.

代參加講習人員簽章：_____

Signature

中 華 民 國 年 月 日

Year

Month

Day

填表說明注意事項：Notice:

一、相關法規及申請程序，請依照本機關網站所載最新規定辦理。

1. Relevant regulations and application procedures, please follow the latest regulations on the website of

Workforce Development Agency.

二、新任外國人請填護照號碼，倘非首次來臺受聘且有護照號碼異動之情事，應立即向內政部移民署辦理居留資料異動事宜。

2. Foreigner's passport number is required. If the foreigner is not employed in Taiwan for the first time and has renewed the passport number, he/she shall immediately apply to the Immigration Agency of the Ministry of the Interior for the update of your information.

三、新任外國人行動電話必填，且不得與雇主電話相同，未填寫者，將退請補正確認；電子郵件須勾選「有」或「無」，未勾選者，將退請補正確認，若勾選「有」，請確實填寫且不得與雇主電子郵件相同。

3. The foreigner's mobile number is required and cannot be the same as the phone number of the

employer. If the phone number is not provided, the application will be returned for revision; the email section must be checked "Yes" or "No", or else the application will be returned for revision. If you tick "Yes", please enter the email address and it must not be the same as the email of the employer.

四、外國人工作地址為被看護者之居住地址，請勾選「同招募許可函」，或「第 3 地」並檢附被看護者居住證明文件正本。(如為養護機構地址或與實情不符者，將撤銷聘僱許可)。

4. If the foreigner's work address is the residence address of the care recipient, please tick "same as stated in the recruitment permit". The care recipient's proof of residence is required if you tick "other address". (If it is the address of a nursing facility or does not match the actual condition, the employment permit will be revoked)

五、雇主為本國人請填身分證字號；外國人請填護照號碼。

5. If the employer is Taiwanese, please enter the ID number; for foreigners, please enter the passport number. You can leave this field blank if you have attached the approval letter in the application.

六、為減少雇主辦理申請案所需檢附文件，本部將依申請書所填身分證字號及關係逕向戶政機關查驗相關人員親等關係及基本資料，又親屬關係可由本部自戶政機關查知者，得免附戶籍資料。另關係為婆媳、翁婿、孫媳婦、孫女婿等，因其親屬型態建立於婚姻關係，故需填寫配偶身分證字號。

6. In order to reduce the number of documents that employers need to provide, the Ministry of Labor will check the family relationship and basic information of the relevant personnel with the household registration authority according to the ID number and relationship filled in the application form. In the case where the family relationship can be checked by the Ministry from the household registration authority, household registration documents could be exempt. For any relatives by marriage, the spouse's ID number is also required.

七、審查費(公立就業服務機構：100 元，雙方或三方合意：200 元)收據：分為電腦收據(白色)及臨櫃繳款收據(綠色或藍色)2 種，填寫如下：

7. There are two types of receipt of the application such as a WHITE slip and a GREEN or BLUE slip, 100 NTD for public employment service institution; 200 NTD for two-party and three-party consent.

電腦收據(各郵局開具之白色收據)：

If you pay at the post office (a WHITE slip)

範例 00002660 110/06/11 16:46:33

Ex. 003110 1A6 297174

00002660	110/06/11
劃撥收據號碼(8 碼) receipt No. (8 digits)	繳費日期 date
003110	
郵局局號 Branch code	

填寫 繳費日期：110 年 6 月 11 日，郵局局號：003110，劃撥收據號碼(8 碼)：00002660

Fill in the form as follow: payment date: 110 y 06 m 11 d; branch code: 030110; receipt No. (8 digits): 00002660

(1) 臨櫃繳款收據(郵局派本機關駐點開具之綠色或藍色收據)：

If you pay at our office (a GREEN or BLUE slip)

局號	000100-6
110.06.11	

範例 右上角 B-5103097，經辦局章戳

ex. upper right corner B-5103097; with the stamp of the post office

填寫 交易序號(9 碼)：B-5103097，繳費日期：110 年 6 月 11 日，郵局局號：000100

Fill in the form as follow

transaction No. (9 digits): B-5103097 ; payment date: 110 y 06 m 11 d ;branch code: 000100

八、招募許可函請務必檢附正本。

8. Shall provide the original copy of the recruitment permit. You can leave this field blank if the permit is attached in the application.

九、許可函文號：範例 勞○○字第 1100641633 號，填寫為 1100641633

9. Employment permit number: ex. 勞○○字第 1100641633 號, please enter 1100641633. You can leave this field blank if the receipt is attached in the application.

十、原雇主如因被看護者死亡，向本機關申請外國人轉出或經本機關與戶政機關勾稽該被看護者死亡資料，經本機關廢止聘僱許可，免附被看護者死亡證明影本。

10. In the case where the care recipient was dead, and the original employer had applied for transfer of the foreigner or the Ministry of Labor had revoked the employment permit after collating the death of the care recipient from the household registration office, the death certificate of the care recipient is not required.

十一、外國人原聘期屆滿，因疫情影響未能出國且雇主未辦理期滿續聘或期滿轉換，經本部同意轉換雇主或工作之文號。

11. The foreigner's original employment period expires, but is unable to go abroad due to the pandemic and the employer has not applied for renewal or transferring at the expiration of the term. The approval letter's number of changing jobs or employers issued by the Ministry of Labor. You can leave this field blank if you have attached the approval letter in the application.

十二、當地主管機關核發雇主接續聘僱外國人通報證明書(簡稱接續聘僱通報證明書)序號：範例 右上角 00000123456789 填寫為 00000123456789

12. Number of the certificate on notifying consecutive employment of the foreigner: ex. on the top right corner 00000123456789, please enter 00000123456789. You can leave this field blank if the certificate is attached in the application.

十三、聘前講習證明序號：第一次擔任雇主聘僱外國人者需填寫，範例 編號702010120043 填寫為 702010120043。非雇主本人參加講習者，需檢附代雇主參加講習人員屬共同居住親屬或代雇主行使外國人管理監督地位之證明文件或切結書(切結事項三)。

13. Certificate number of the employer training session: required for first time employer, ex. 編號702010120043, please enter 702010120043. The persons who attend the training session on behalf of the employer shall provide the certificate or statement (Affidavit 3) for cohabited relative or exercising the management and supervision over the foreign worker on behalf of the employer. You can leave this field blank if the certificate is attached in the application.

十四、工作期間累計至14年之評點：外國人受聘僱從事就業服務法第46條第1項第8款至第10款工作，累計工作期間屆滿12年或累計工作期間在1年內屆滿12年，外國人從事家庭看護工工作經專業訓練或自力學習，而有特殊表現，符合規定資格及條件者，工作期間累計不得逾14年。

14. Assessment for accumulated working period to be 14 years: According to Paragraph 8 to 10, Section 1 of Article 46 of the Employment Services Act, foreigners who have worked in Taiwan for twelve years or will have worked for twelve years within one year to engage in home care works may be allow to work to accumulated working period up to fourteen years, given the foreign worker has met the criteria (such as having special performance with professional training or self-learning).

十五、☐請依實際情況勾選，如須檢附文件，務必檢附。

15. Please tick the boxes (☐) accordingly do submit the required documents.

十六、申請文件除政府機關、醫療機構、學校或航空公司核發或開具之證明文件外，應加蓋申請人或公司及負責人印章。

16. According to the related regulations, documents should include the stamps of the company and the stamps of the responsible person. (Documents issued by the government, school, health facility and airline are exempt.)