**National Taiwan University of Science and Technology**

**Adjunct Faculty Labor Insurance, Health Insurance, and Labor Pension Enrollment Application Form**

◎Please ensure that this form is completed 3 days prior to the start date of the appointment. After the appointing department (or center) has reviewed and verified the salary details and the department (or center) head has signed the form, please submit it to the Personnel Office. If the form is not submitted before the start date stated on the contract, the insurance shall take effect on the date that the Personnel Office receives the complete set of required documents.

* Adjunct faculty with primary employment (including those who have received retirement or elderly benefits): Fill out this form as required. If there is no need, the form need not be completed.
* Adjunct faculty without primary employment (as defined later in this document): In addition to filling out this form as required, it is mandatory to select the “Labor Pension” eligibility field and attach the *Affidavit for Adjunct Faculty without Primary Employment*.

◎For adjunct faculty reappointed for an entire semester and who require continued insurance coverage, this form does not need to be completed; the appointing department (or center) handle the continuation of the insurance.

◎Foreign nationals must also submit photocopies of their passport, residence permit, and work permit letter to the Personnel Office.

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| --- | --- | --- | --- | --- |
| **Basic information** | Name(Insured person)  |  | Monthly hourly fee | [Hourly fee rate according to academic program] multiplied by [actual hours worked] multiplied by [4 weeks]**(The calculation method is explained in detail on the back of this form and will be reviewed by the department)** |
| Job title | □Adjunct professor□Adjunct associate professor□Adjunct assistant professor □Adjunct instructor□Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Appointing department (or center) |  | Gender |  | DOB (mm/dd/yyyy) |  | Appointme-nt period | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (mm/dd/yyyy) |
| National ID/ARC |  | Contact No. |  | Nationality | □Republic of China　 □Other country: \_\_\_\_\_\_\_\_\_\_ |
| Disability | □No □Yes **(Please attach a photocopy of the disability manual)** | Indigenous citizen | □No　 □Yes | Elderly resident in Taipei | □No　 □Yes |
| Residence address |  |
| **Please read the insurance item description carefully and check as needed** |
| **Labor insurance** | **Ineligible** | □In-service military personnel, civil servant, or teacher.□Aged 65 years or older and has not participated in labor insurance (NTUST will still enroll you in occupational hazard insurance). |
| **Eligible** | □Aged under 65 years, has not previously participated in any insurance, and intends to enroll in labor insurance.□Aged under 65 years, has previously participated in social insurance (not current employment) or labor insurance, has not received elderly benefits, and intends to enroll in labor insurance. □Aged under 65 years, has received elderly benefits from labor insurance, and intends to enroll in occupational hazard insurance.□Aged under 65 years, has received elderly benefits from other social insurance, and intends to enroll in labor insurance.□Aged 65 years or older, has previously participated in labor insurance, has not received elderly benefits from labor insurance, and intends to enroll in labor insurance. □Aged 65 years or older, has previously participated in labor insurance but has received elderly benefits from other social insurance, and intends to enroll in labor insurance. □Aged 65 years or older, has received elderly benefits from labor insurance or other social insurance, and intends to enroll in occupational hazard insurance. |
| **Health insurance** | □Already insured through another institution; I will not participate in health insurance.□Not insured through another institution; I intend to enroll in health insurance. (No need to fill in the dependent health insurance section.□Not insured through another institution; I and ﹍﹍(number) of my dependents intend to enroll in health insurance. (Please fill in the dependent health insurance section in detail and attach relevant documentation as described on the following page. |
| **Dependents’ health insurance** |
| Name of dependent | National ID/ARC | DOB (mm/dd/yyyy) | Appellation | Insurance enrollment date (mm/dd/yyyy) | Disability**(Please attach a photocopy of the disability manual)** | Elderly resident in Taipei |
|  |  |  |  |  | □No □Yes | □No □Yes |
|  |  |  |  |  | □No □Yes | □No □Yes |
| **Labor pension** | **Ineligible** | I currently fall under one of the following conditions:□Covered by an existing retirement plan for in-service full-time employees (e.g., military, civil service)□Receiving a pension□Possessing another full-time professional status |
| **Eligible****(Please attach an affidavit)** | I am without primary employment and am not covered by any retirement plan, nor have I ever received a pension. The employer’s contribution portion of the labor pension is deducted from the salary allocated for this position. For the personal contribution portion (voluntary contribution), I may choose whether to contribute and set the contribution rate. □Opt to not contribute □Choose to voluntarily contribute, with a contribution rate of \_\_\_\_% (please specify a rate between 1% and 6%) |
|  ◎After completing this form and having it reviewed by the appointing department (or center) and obtaining the signature of the department (or center) head, please submit it to the Personnel Office. Should there be any questions, please contact Ms. Han at the Personnel Office (Tel: 2737-6256). |

**Signature or seal of applicant：**

**(Please make sure to check all attached information and fill it out truthfully; otherwise, you will be subject to legal liabilities)**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_(yyyy/mm/dd)

**Signature or seal of department or center：**

**(Please confirm that the salary and content are correct before signing or sealing)**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_(yyyy/mm/dd)

**Signature or seal of Personnel Office：**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_(yyyy/mm/dd)

1. Instructions

 for Completing the Form (please read carefully):

1. If a course cannot be opened due to insufficient student enrollment and you are unable to continue teaching and receive hourly fees, please promptly inform your department (or center) that it should complete the “Adjunct Faculty Labor Insurance, Health Insurance, and Labor Pension Change Application Form” and submit it to the Personnel Office, which will process the change or cancellation.

(2) For adjunct faculty appointed for a single semester, if you are teaching this semester but will not be teaching next semester, you must notify your department (or center) that it must complete the “Adjunct Faculty Labor Insurance, Health Insurance, and Pension Change Application Form” **three days before the end of the semester** and submit it to Personnel Office, which will process the cancellation of insurance. If you are reappointed later, please complete this form again to apply for insurance coverage.

(3) If Personnel Office is not notified to process the cancellation of an adjunct faculty member’s insurance, with this failure leading to overdue insurance premium payments, the appointing department (or center) will be responsible for covering these costs. (Resolved at the 374th NTUST administrative meeting.)

(4) Hourly Fees for Adjunct Faculty at NTUST:

|  |  |  |  |
| --- | --- | --- | --- |
| Title | **Day** | **Night** | Notes |
| Professor/Professional technical staff | 1035 | 1080 | \*Unit: NT$/hour\*Rates for in-service master programs are calculated separately on the basis of the program. |
| Associate Professor/Associate professional technical staff | 890 | 925 |
| Assistant Professor/Assistant professional technical staff | 830 | 870 |
| Instructor/Instructor-level technical staff | 755 | 805 |

Monthly Remuneration for Adjunct Faculty: The monthly remuneration is used as a reference for calculating contributions to labor insurance, health insurance, and pension funds or for allocating severance savings. The calculation formula is **[hourly fee rate according to academic program] × [actual hours worked] × [4 weeks]**. If there are any questions about the actual hours worked, please contact your department (or center) or the Division of General Academic Affairs of the Office of Academic Affairs.

Example: For an adjunct instructor in a daytime academic program working 4 hours per week, the monthly payable fee shall be NT$755 × 4 hours × 4 weeks = NT$12,080.

 (5) For dependents requiring health insurance, Republic of China nationals should attach photocopies of the household registration transcript or household register for verification. For dependents over 20 years old, please attach the appropriate documentation for the insurance, such as a student ID or a photocopy of the military discharge order if they were discharged less than 1 year ago. Foreign nationals should attach photocopies of the dependents’ ARC and proof of entry and exit dates (please consult the National Immigration Agency of the Ministry of the Interior for details).

2. Summary of Regulations for Adjunct Faculty Participation in Labor Insurance:

1. Adjunct faculty who meet the qualifications set forth by the Labor Insurance Act, Employment Insurance Act, or the National Health Insurance Act are insured by NTUST for labor insurance, employment insurance, and national health insurance during the effective period of their contract, as stipulated by Article 11 of the Ministry of Education’s Regulations on the Appointment of Adjunct Faculty in Institutes of Higher Education.
2. Those who already have insurance coverage under the civil servant, military personnel, or labor insurance schemes must choose one of the types of insurance and cannot be doubly insured. This is stipulated by the directive issued on May 11, 2007, by the Directorate-General of Ministry of Civil Service (Order No. 09627749231).
3. Since November 28, 2008, regulations have been relaxed regarding dual coverage under labor and farmers’ insurance. If an insured farmer primarily engages in agriculture but works part-time in the farming off-season, they may participate in labor insurance without their eligibility for farmers’ insurance being affected provided that the number of days of overlapping coverage in any given year does not exceed 180. If the limit is exceeded, their farmers’ insurance eligibility will be canceled starting from the 181st day in accordance with the directive issued by the Ministry of Agriculture on March 17, 2009 (Order No. 0980050384).
4. Employees who hold more than one job and meet the criteria set forth in Sections 1 to 5 of Article 6 of the Labor Insurance Act shall have their labor insurance processed by their respective employers, as directed by the Council of Labor Affairs in the order issued on May 1, 2009 (Labor Insurance Directive No. 0980140222).
5. Individuals who have already received elderly benefits under labor insurance, or those who are over the age of 65 years and have received retirement benefits from civil service or military insurance, veterans benefits, elderly farmer welfare subsidies, or elderly benefits under the National Pension Insurance, may have insurance coverage limited to occupational hazard insurance if they are employed by an institution insured under the labor insurance scheme. This is regulated by the order from the Ministry of Labor dated November 19, 2014 (Labor Insurance Directive No. 1030140437).
6. Insurance coverage commences on the actual date of the reported enrollment; the same applies to cancellation of the insurance, as per the order issued by the Council of Labor Affairs on April 15, 2008 (Labor Insurance Directive No. 0970140137).

3. Summary of Regulations regarding Adjunct Faculty Participation in Labor Pension:

1. Adjunct faculty members who meet the qualifications prescribed by the Labor Pension Act are required to fill out the *Affidavit for Adjunct Faculty without Primary Employment*. During the effective period of their contract, NTUST will contribute to the labor pension monthly for these adjunct faculty members, as stipulated by Article 12 of the Ministry of Education’s Regulations on the Appointment of Adjunct Faculty in Institutes of Higher Education. The term “without primary employment” refers to adjunct faculty who do not fall under any of the following categories: military insurance beneficiary, government employee insurance beneficiary, farmers’ health insurance beneficiary, recipient of retirement benefits (from military or civil service), or full-time worker covered by labor insurance (including full-time staff at a governmental or educational institution, a full-time employee at a public or private enterprise, a business owner, or a self-employed professional).
2. Should there be a change in the status of primary employment of a faculty member, please contact the relevant office to update their status.

4. For more information on labor insurance and pensions, please visit the Bureau of Labor Insurance website at [**http://www.bli.gov.tw/**](http://www.bli.gov.tw/). For regulations regarding the appointment of adjunct faculty at institutions of higher education, please visit the Ministry of Education’s legal regulation system at [**http://edu.law.moe.gov.tw/index.aspx**](http://edu.law.moe.gov.tw/index.aspx).

**National Taiwan University of Science and Technology**

**Affidavit for Adjunct Faculty without Primary Employment**

All adjunct faculty members are required to carefully read and select the appropriate options on the basis of their actual circumstances, to sign the document, and to return it to the Personnel Office. If subsequently employed in a full-time position, the faculty member or the appointing department (or center) must inform the Personnel Office to process the change regarding their non-primary-employment status.

New adjunct faculty members must submit this affidavit along with the “Adjunct Faculty Labor Insurance, Health Insurance, and Pension Enrollment Application Form” three days prior to the start date of their appointment.

□I do not have any of the following statuses and plan to comply with Article 12 of the Regulations on the Appointment of Adjunct Faculty in Institutes of Higher Education and Section 2 of Article 14 of the Labor Pension Act to make monthly contributions to the labor pension fund:

1. Military insurance status

2. Civil service insurance status

3. Farmers’ health insurance status

4. Recipient of retirement benefits in accordance with relevant retirement (civil service or military) regulations

5. Full-time worker covered under labor insurance:

 (1) Insured through a governmental or educational institution as full-time paid staff

(2) Insured through a nongovernmental or noneducational entity:

 i. Full-time employee of a public or private enterprise or organization

 ii. Employer or self-employed business owner

 iii. Self-employed professional or technician

Sincerely,

National Taiwan University of Science and Technology

Service department or center:

Name: (Signature or seal)

Date (mm/dd/yyyy):

Note: This form is processed in accordance with the Ministry of Education’s Guidelines for Subsidizing the Payment of Labor Pensions for Adjunct Faculty without Primary Employment at Institutions of Higher Education.