

Date(DD/MM/YY): _____

中央研究院防範嚴重特殊傳染性肺炎健康關懷表

您好，為因應嚴重特殊傳染性肺炎疫情，我們十分關心您的健康，多一分準備，就能多一分安心。為了保障全體員工及訪客的身體生命安全，請詳細閱讀後填寫下列資料，敬祝您身體健康，事事順心。

姓名：

信箱：

連絡電話：

體溫： °C

請問您是否為新型冠狀病毒肺炎居家檢疫或居家隔離或自主健康管理個案。	<input type="checkbox"/> 否	<input type="checkbox"/> 是
請問您在過去 14 天內,是否有出國紀錄?	<input type="checkbox"/> 否	<input type="checkbox"/> 是
請問您在過去 14 天內,是否與從旅遊疫情第一到三級區域入境的人士面對面接觸過?	<input type="checkbox"/> 否	<input type="checkbox"/> 是
您是否有在過去 14 天內出現發燒、上呼吸道症狀，如咳嗽、喉嚨痛、呼吸困難、流鼻水。	<input type="checkbox"/> 否	<input type="checkbox"/> 是

蒐集個人資料告知事項暨當事人同意書

依據個人資料保護法之規定，為維護雙方的權益，及所必要提供之服務，對於所提供個人資料之蒐集、處理或利用，說明如下：

- (一) 填報時所提供之個人資料，將做為協助嚴重特殊傳染性肺炎(COVID-19)相關訊息連絡及資料統計分析等使用。本院會妥善履行個人資料保護的義務。
- (二) 依據個人資料保護法，所填資料得向本院查詢或請求閱覽、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、或請求刪除。

本人已瞭解上述事項，並同意中央研究院於所列蒐集目的範圍內，合理蒐集、處理或利用本人之個人資料。

簽名： _____

Health Declaration Form for COVID-19 Outbreak Prevention

In order to prevent the spread of COVID-19 and ensure the health and safety of every member of our community, please read the following form carefully and complete it truthfully.

Name :

Email Address:

Contact Phone:

Body Temp : °C

Are you required by the government of Taiwan to observe Home (Self) Isolation, Home Quarantine, or Self-Health Management?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
During the past 14 days, have you ever travelled abroad?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
During the past 14 days, have you been in direct contact with anyone who has gone to Travel Notice Level 1-3 areas?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
During the past 14 days, have you experienced fever and/or upper respiratory symptoms such as a cough, sore throat, shortness of breath, or runny nose?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

Personal Information Collection Statement and Authorization Agreement

According to the Personal Data Protection Act, in order to protect the rights of both parties and ensure the necessary services provided, all collection and use of personal data adheres to the following guidelines:

- (1) Personal data provided in this declaration form will be used to assist communications pertaining to and statistical analysis of Coronavirus Disease 2019 (COVID-19). Academia Sinica will ensure the protection of your personal data.
- (2) According to the Personal Data Protection Act, you may request Academia Sinica to take the following actions regarding your data search or request for browsing, reproduce copies, amend or correct, terminate collection, processing, or usage,delete.

I understand all of the above information, and agree that Academia Sinica may collect, process, or use my personal data in accordance with the purposes listed above.

SIGNATURE: _____