

貴家長台鑒：

由於貴子弟來臺就讀，路程遙遠，為全面照顧保護貴子弟在臺之生活學習及身心健康，在校期間，若貴子弟發生醫療、意外、法律等一切緊急事故，必須家長填具緊急事件同意書，始能接受代為妥善處理（例：住院、手術等）或其他必要之手續；如貴家長不克適時前來簽署，可授權樹德科技大徐（以下簡稱本校）或同意本校再次授權予相關人員代為簽具相關同意書。

此事攸關貴子弟健康安全及在臺權益，本校尊重貴家長意見，隨函附上緊急事件授權同意書一份，俾憑因應緊急事件之需要。請於本同意書上簽名表示同意或不同意，並由貴子弟於到校註冊時繳回，以釐清責任歸屬。尚此，順請
台安

樹德科技大學學生事務處 敬啟

緊急事件授權同意書

本人係貴校_____系(所)學生_____之_____法定代理人
家長_____，因緊急事件需要

- 同意** 授權貴校或貴校再次授權予相關人員代為簽具醫療、意外、法律等一切緊急事件同意書，本人願承擔一切責任。
- 不同意** 授權貴校代為簽具醫療、意外、法律等一切緊急事件同意書，本人願承擔一切責任。

此致

樹德科技大學

未成年人之法定代理人： (簽名)

成年人之家長： (簽名)

行動電話號碼：

在臺聯絡人：

緊急聯絡電話：

西元 年 月 日

This consent form aims to provide Shu-Te University with the necessary authority to provide your child with comprehensive care and protection in ensuring their physical and mental health wellbeing during their stay and study in Taiwan. Given the distance and absence of the parents in directly responding to unforeseen emergencies that might occur during your child's stay in Taiwan, this forms give the university authority and power to act on behalf of the parents in the proper processing of a medical emergency (for example, hospitalization, surgery, legal actions, etc.) involving your child.

With matters relating to the health and safety of your child and the exercise of rights and interests in Taiwan, we hereby respect the parents' willingness to provide consent to the university. *Kindly accomplish this form either by agreeing or disagreeing to provide Shu-Te University consent and authority to act on your behalf in case of an emergency.*

Sincerely yours,

Office of Students Affair, Shu-Te University

Emergency Consent Agreement

I, the legal guardian/parent of _____ (student's name) of
_____ (department),

in case of an emergency

- Agree** to authorize the university with the power to sign on my behalf with all the emergency medical, accident, legal consent needed. I am willing to bear all the responsibility.
- Disagree** to authorize the university with the power to sign on my behalf with all the emergency medical, accident, legal consent needed. I am willing to bear all the responsibility.

Legal guardian of the minor (signature):

Parents (signature):

Mobile phone number:

Home phone number/ Email address:

Emergency telephone:

Date (dd/mm/yyyy):