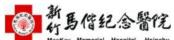


Application Form for COVID-19 Testing (PCR) of MacKay Memorial Hospital

ver.2021.04.29

		Type of identification		☐Taiwan ID ☐ARC ☐Passport		
Name of		Taiwan ID / ARC				
applicant		Passport		If you are ready departure,	please bring the passport	
		Date of birth		MonthDay_	Year	
	The person under h	house quarantine/isolation needs to travel for compassionate reasons or other urgent and				
	special need for relatives in Taiwan or overseas.					
	A person who needs to go abroad for compassionate reasons or other urgent needs for relatives overseas					
Reason for	☐Work required					
the	Short-term busin	term business travelers				
application	ion Study abroad					
	Foreigners or people coming from China, Hong Kong or Macao need to de-part from Taiwan					
	Family members of the eligible self-paid COVID-19 applicant					
Others:						
Departure [Fill out if applicable]		Date of Departure	Month	_DayYear	Flight No.	
Consent to collection, processing, and use of personal data relating to COVID-19 PCR testing		By providing my signature below, I (the applicant) give consent to the National Health Insurance Administration (NHIA) and the Taiwan Centers for Disease Control (Taiwan CDC) to process or use my personal data (including name, ID No., date of birth, test results, etc.) collected for COVID-19 PCR testing by				



MacKay Memorial Hospital, Hsinchu	
	2.I agree to provide personal data to Taiwan CDC for epidemic surveillance purposes for the following time period: (please check one box) □permanently □within year(s) from the date of this application form. [Signature] Legal representative(Signature) I fully understand the following information: My refusal to give this consent will not have any effect on my COVID-19 testing application. If I agree to provide my personal medical information to the NHIA and Taiwan CDC, I am entitled to exercise the following rights with regard to my personal data provided and to reserve the right to revoke this consent at any time according to Article 3 of the Personal Data Protection Act in Taiwan: 1. the right to make an inquiry of and to review my personal data; 2. the right to request a copy of my personal data; 3. the right to supplement or correct my personal data; 4. the right to demand the cessation of the collection, processing or use of my personal data; and 5. the right to erase my personal data. Date: // (DD/MM/YYYY)
Report	Chinese and English version copies Japanese version copies
	State of Hawaii Certificate of testing for covid-19copies
Mobile(for Text message):Signature: Date:	