[This document consists of two pages with the first page being the statement.]

Statement of Self-quarantine in Quarantine Hotels Outside Hsinchu City with Self-arranged Transport and Assistance from Family/Friend in Taiwan

I, ______ intend to enter Taiwan on _____(mm) ____(dd). I will arrange transport for myself to a quarantine hotel outside Hsinchu City (County/City: ______). I have asked a family member/friend in Taiwan (details below) to provide necessary assistance for me (including medical assistance) while I am in self-quarantine outside Hsinchu City. I have no objection to it being not necessary for the university to handle any needs during the self-quarantine period.

Details of Family/Friends in Taiwan

Name:

Relationship:

Contact address:

Contact number:

Email:

To National Tsing Hua University

Student No.: Declarant: Date:

Notes:

- 1. The details of the family member/friend provided in the statement will be checked by the university, and his/her consent to provide assistance will have to be confirmed. The entry request will not be filed with the ministry until the consent is confirmed. If consent is not given, the entry request cannot be filed, and the declarant will be asked to find another family member or friend in Taiwan. If the filing process is delayed and renders the declarant unable to enter the country on the date provided, the declarant should be responsible for paying the costs of reissuing the flight ticket and missing the hotel reservation.
- 2. Please send the completed statement by email to the overseas student counseling services.

[This document consists of two pages with the second page being the consent form.]

<u>Consent of Family/Friend in Taiwan to Providing Assistance</u> <u>for Person in Self-quarantine</u>

Affix	copy	of ID	of Family	/Friend	in	Taiwan	here
			e				

I hereby give consent to providing assistance in meeting everyday needs for the person in quarantine (Name: _____) at a quarantine hotel during the self-quarantine period. If the person in quarantine is in need of medical assistance, I will assist him/her by going to the hotel to pick up his/her identification document and then collecting medication and paying the expenses at a hospital on his/her behalf.

To National Tsing Hua University

Signature of declarant's family/friend in Taiwan:

Date:

Notes: This document (Statement and Consent Form) will be deleted after 28 days of the end of self-quarantine.