

國立中興大學檔案應用委任書 Power of Attorney for NCHU

本人 I, _____ 委託 hereby authorize _____

一、辦理下列事宜(請勾選)

Conduct the following matters (please check the appropriate box(es)) :

- 申請應用檔案 Apply to access archives
 應用(閱覽、抄錄或複製)檔案 Access (view, hand-copy, and/or duplicate) archives
 領取檔案複製品 Pick up duplicated archives
 申請案聯繫及公文送達事宜
Serve as liaison during the application process, and accept delivery of related official documents

二、是 否 同意複委託。(未勾選則視為不同意)

Is the agent permitted to reauthorize? Yes No (Failure to check any box shall be treated as a refusal.)

此致 國立中興大學

Submitted respectfully to the National Chung Hsing University

	委託人Principal	受委託人Proxy
親筆簽名 Personal signature		
國民身分證、護照、 或居留證號碼 National identification, passport or Alien Residence Card number		
通訊地址 Correspondence address		
聯絡電話 Contact number		

附註：1.委託人即為申請應用檔案之申請人；受委託人為代理人。

The authorizing party is the party applying for access or value-added access to archives; the authorized agent is the agent for the authorizing party.

2.併附委託人及受委託人之身分證明文件影本。

Photocopies of the identification documents of the authorizing party and authorized agent must be furnished together with this form.

3.委託人若非檔案當事人，併附身分關係證明文件。

The authorizing party is not the involved party must be furnish an identification document.

中華民國 (Day) _____ 年 (Year) _____ 月 (Month) _____ 日 (Day)