**國立屏東科技大學**

**薪資所得受領人扶養親屬申請表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓名 | |  | | | 身分證字號 | | | | | | | | | |  | | | | | | | | | | | | | | | |
| 職稱 | |  | | | 單位 | | | | | | | | | |  | | | | | | | | | | | | | | | |
| 薪資  帳戶 | **請附存摺**  **影本** | □郵局 |  |  | | | |  | |  | |  |  | | | |  | |  | |  | |  |  | |  | |  | |  |
| □第一銀行　　　分行 |  | | | |  | |  | |  | | |  | | | |  | |  | |  | | |  | |  | |  | |
| 電子信箱 | | 【入帳通知用】 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 戶籍地址 | | □□□□□ | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 通訊地址 | | □□□□□ | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 手機 | |  | | | | 出生年月 | | | | | | | | | |  | | | | | | | | | | | | | | |

※上表係扣繳薪資稅額之依據，請儘速填妥交出納組，謝謝。

**配偶及受扶養親屬填列如下表，合計　　人。**

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|  | 稱謂 | 姓　　名 | 身分證字號 | 出生年 | 備註 |
| １ | 配偶 |  |  |  | 符合下例條件者，皆可受扶養：  1.直系尊親屬：年滿60歲或無謀生能力。如(配偶)父母、(配偶)祖父母。  2.子女：未滿20歲或在學或身心障礙。  3.兄弟姊妹：未滿20歲或在學或身心障礙。含配偶兄弟姊妹，但不含堂(表) 兄弟姊妹。  4.其他親屬：未滿20歲或在學或身心障礙。如孫、(配偶)伯、姪、甥、舅等。 |
| ２ |  |  |  |  |
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※如有結婚、離婚、受扶養親屬增加或減少，請重新填報上表交出納組。

薪資受領人簽章：　　　　　　填報日期：

(公教存款申請限專任教師及正式職員)

公教存款申請(限專任教師及正式職員)□否□是，存款金額 元(1萬元以下)，相關申請程序將以EMAIL聯繫。

申請人簽章：