

HONG KONG BAPTIST UNIVERSITY
香港浸會大學

Declaration Form for Insurance Coverage for Official and Personal Overseas Trips
For University Staff & Student

個人海外公幹/遊學旅程旅遊保險申報表 – 職員及學生適用

(Zurich Policy No. 蘇黎世保險公司保單編號 TTT0001125ZC)

Notes 注意：

- This Declaration Form is applicable to **Authorised Official Overseas Trips** and associated **Personal Trips** of University Staff and Students only.
此申報表只適用於大學教職員及學生的**獲批准的海外旅程**及緊接著的**個人旅程**。
- Authorised Official Trips** (“Official Trip”) refer to overseas trips for business staff and overseas trips for study or exchange program or university activities of students approved or arranged or supervised by the University. **Personal Trips** refer to the period before or after the **Authorised Official Trip** and is for personal leisure activities.
獲批准的**官方旅程**是指由大學批准或安排或監管的教職員往海外公幹的旅程及學生到海外進行遊學或交流學習或參與大學活動的旅程。**個人旅程**是指緊接著**獲批准的海外旅程**前或後的**個人旅遊活動**。
- Staff or Students shall fill in this Form and submit to Finance Office with relevant insurance premium before Departure Date for Trips. Insurance cover for Authorised Official Trips will be effective only after valid Declaration has been submitted and any additional premium required for the whole trip has been settled before the departure.
教職員及學生於旅程出發日前，必須填寫此申報表，連同相關保險費交回財務處。此保險只會在呈交有效申報表及繳交整個旅程之額外保費後方能生效。
- The age limit of Insured Person(s) under this Insurance Program is between 17 – 80 years (both inclusive). Other age range is subject to the insurer’s approval.
本保險計劃只保障年齡介乎 17 至 80 歲之人士。其他年齡組別之人士須得到保險公司的特別批准，其保險方能生效。
- This Declaration Form and related Insurance Summary are available at the website “http://fohome.hkbu.edu.hk/fopage.html”. Should you have any question in completing this Form, please call the Finance Office at 3411-7683.
此申報表及有關保險摘要可在網站“http://fohome.hkbu.edu.hk/fopage.html”下載，如對填寫此表格有任何疑問，請致電財務處 3411-7683 查詢。

Personal Particulars – 個人資料

Insured Name in English (same as in HKID Card/Passport) _____ Age at Departure Date
受保人英文姓名 (須與香港身份證/護照相同) 出發日的年齡 _____

Student Card ID No. _____ Staff ID No. _____ Faculty / Dept
學生證編號 _____ 教職員編號 _____ 學系/部門 _____

Contact Email _____ Contact Number _____
聯繫電郵 _____ 聯絡電話號碼 _____

Trips Information – 旅程資料

Nature of Trip Business Trip Study Trip Personal Trip
旅程性質 公幹旅程 遊學旅程 個人旅程

Departure Date _____ Trip Destination _____ Departure Place (if not HK)
離境日期 旅程目的地 離境地點 (如非香港)

Official Trip From (dd/mm/yy) _____ To (dd/mm/yy) _____ Total No. of Days
官方旅程日期 由 (日日/月月/年年) 至 (日日/月月/年年) 總日數 _____

Personal Trip From (dd/mm/yy) To (dd/mm/yy) Locations Total No. of Days
個人旅程 由 _____ 至 _____ 地點 _____ 總日數 _____

Premium required HK\$
須繳交之保險費用 港幣 _____ (To be completed by Finance Office 由財務處填寫)

- * Please submit the document/information issued by HKBU/related university or organization, including the insured name, destination, exact start and finish date of the official trip to verify the period of the trip that can be free of premium
- * 請呈交由香港浸會大學或相關大學/機構發出含受保人, 目的地及公幹/遊學確實日期的文件/資料, 以核實旅程中免於繳交保費的日期*

Total Travelling Hours to First Destination (Flight/Train/Bus)
離境至首個目的地所需的總交通時數(飛機/火車/巴士) _____

No. of quarantine days required at First Destination:
抵達首個目的地後所需的隔離日數 _____

Start Date of Quarantine in Overseas Finish Date of Quarantine in Overseas
於海外隔離起始日期 _____ 於海外隔離結束日期 _____

Total Travelling Hours back to HK (Flight/Train/Bus)
回港所需的總交通時數(飛機/火車/巴士) _____

Date of Arrival at HK (Insurance Period End Date)
抵達香港日期 (旅遊保險的結束日) _____

Required Insurance Certificate for Apply Visa/Resident Permit or others? Yes No
需要保險證明以申請簽證/居民證或其他? 需要 不需要

If yes, please provide the minimum amount of medical expenses coverage required in HKD and
如需要, 請提供所需的醫療費用保障額(港幣) 及 HKD _____

Official Information from embassy/immigration/school etc. regarding the insurance requirements
由使館/入境部門/學校等發出有關保險要求的資料

Signature of Staff or Student Date of Signature
教職員或學生簽署 _____ 簽署日期 _____

- ** You will be contacted by the Finance Office for premium settlement if additional premium is needed.
- ** 若有需要, 財務處將聯絡閣下以通知繳交額外保費的事宜。

Personal Data on the Form 本表格內的個人資料

From time to time, it is necessary for you to provide the Finance Office with Personal Data in order to receive services from the Finance Office.

閣下須不時向財務處提供個人資料, 以便財務處提供服務。

1. The Personal Data collected on this Form are used for the purpose of arranging Insurance Cover for the applicant.
本申請表上的個人資料將會用作安排保險用途。
2. Your personal Data would be disclosed to the underwriters, insurance brokers or any other persons or companies for the purposes of Overseas Travel Insurance for Trips of staff and students.
閣下的個人資料會提供給保險公司, 保險顧問或其他人士/公司作安排保險用途。
3. You have the rights to check, correct or gain access to your personal data filed with the Finance Office. The University has the right to charge a certain fee for the processing of every data access request. All requests for access/correction of personal data held by the Finance Office should be addressed to: Director of Finance, Finance Office, Hong Kong Baptist University.
閣下有權查核, 更正或取得你在財務處檔案內之個人資料。大學有權對個人資料之查閱酌量收取費用, 如欲取得/更正閣下在財務處之個人資料, 請致函 香港浸會大學 財務處 財務長。
4. For more details of the University's Privacy Policy Statement and Personal Information Collection Statement, please visit the website at <http://bupdpdpo.hkbu.edu.hk/policies-and-procedures/pps-pics/>.
有關大學的私隱政策聲明及收集個人資料聲明的詳情, 請參閱網站 <http://bupdpdpo.hkbu.edu.hk/policies-and-procedures/pps-pics/>.