**英文出生證明申請書**

**Application for Certificate of Birth**

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| **母親病歷號碼**或身份證字號(Birth mother’s medical record number or I.D. number)  (請至服務台查詢) | | | |
| **填寫所有英文姓名，請務必與護照上相同，並以英文正楷填寫。事後更改，恕不退費。**  Please print all names in English. All names must be the same as shown on your I.D.s and passports. | | | |
| **父親姓名**(Father’s Name)  中文： | (以申請人填寫之資料為準，即使僅填父親或母親一方，本院亦不另做修正)  英文: | | |
| **母親姓名**(Mother’s Name)  中文： | (以申請人填寫之資料為準，即使僅填父親或母親一方，本院亦不另做修正)  英文: | | |
| **嬰兒姓名**(First name, Last name)  中文：  英文： | | | **性別**(Gender)：  🞏男(Male)  🞏女(Female) |
| **出生日期及時間**  (Date and Time of Birth) | 民國\_\_\_\_\_\_\_年\_\_\_\_\_\_\_月\_\_\_\_\_\_\_日\_\_\_\_\_\_\_時\_\_\_\_\_\_\_分  (yy) (mm) (dd) (hr) (min) | | |
| **申請份數**(copies needed)：\_\_\_\_\_\_\_  **第一份300元，每加一張5元**(NT$300 for the 1st copy, NT$5 for each additional copy) | | **接生醫師**  (Attending physician) |  |
| **申請日期**(Date)： \_\_\_\_\_\_\_年(yy)\_\_\_\_\_\_\_月(mm)\_\_\_\_\_\_\_日(dd)    □電話通知取件(Call for pickup)  **申請人**(Applicant)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  □掛號郵寄加50元(An extra NT$50 for Registered Domestic Mail)    地址(Mailing address):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **日間聯絡電話**(Phone)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| 附註：  1.本出生證明書辦理所需時間及郵寄約需六個工作天.  Processing this application will take up to 6 business days.  2.請附媽媽身份證正本及媽媽和小孩的戶籍謄本(記事)  Please provide:(1) Birth mother’s original photo ID and birth mother’s Household Registration Transcript;  (2)Household Registration Transcript of the Birth Certificate applicant. | | | 批價人員: |