**臺中市救護車設置機關(構)所屬救護人員名冊**

**救護車設置機關(構)名稱：**

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| --- | --- | --- | --- | --- | --- | --- |
| **序號** | **姓名** | **身分證字號** | **性別** | **資格** | **證書有效日期** | **職業駕駛執照** |
| 範例 | ○○○ | B123456789 | 男 | 初級救護技術員 | 102.12.31~105.12.31 | 職業小型客車 |
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◎請檢附所屬人員相關證件，並黏貼於下頁所附表格內：

1.救護技術員合格證書

2.救護車駕駛員之汽車駕駛執照

**臺中市救護車設置機關(構)所屬「救護技術員」合格證書**

|  |  |  |  |
| --- | --- | --- | --- |
| 姓名： | 效期： | 姓名： | 效期： |
| **「證照」正面影本** | **「證照」正面影本** |
| **「證照」反面影本** | **「證照」反面影本** |
| 姓名： | 效期： | 姓名： | 效期： |
| **「證照」正面影本** | **「證照」正面影本** |
| **「證照」反面影本** | **「證照」反面影本** |

\*本頁請自行複印黏貼

**臺中市救護車設置機關(構)所屬救護人員「汽車駕駛執照」**

|  |  |
| --- | --- |
| 姓名： | 姓名： |
| **「執照」正面影本** | **「執照」正面影本** |
| **「執照」反面影本** | **「執照」反面影本** |
| 姓名： | 姓名： |
| **「執照」正面影本** | **「執照」正面影本** |
| **「執照」反面影本** | **「執照」反面影本** |

\*本頁請自行複印黏貼