PERSATUAN PENIAGA ALAT GANTI KEJURUTERAAN DAN KENDERAAN MALAYSIA
馬來西亞機械及車輛零件商會
ENGINEERING AND MOTOR PARTS TRADERS' ASSOCIATION OF MALAYSIA
(PPM-004-14-20101970)

医药援助金申请
APPLICATION FOR MEDICAL AID FUND

申请条规及方法

1 本会医药援助基金只供本会（EMPTA）会员之雇员申请，申请者必须是马来西亚公民，并在该会员公司工作满两年。雇员一旦离职，后又重返原公司任职，一概当新雇员论。若雇员由总公司被调至子公司，而子公司是会员，其工作资历将被允许一起计算。

2 新会员必须在入会一年后，从理事会批准日期算起，方可推荐其雇员申请医药援助金。

3 每项申请的援助金数额为 RM5,000。援助金优先提供给 B40 和 M40 群体，并视所拨预算的情况而定。

4 援助金只限疾病，不包括意外。援助金申请只限于中风、癌症、心脏病、冠状动脉搭桥手术、严重冠状动脉疾病、冠状动脉疾病的血管成形术及其他介入治疗、心脏瓣膜手术、暴发性病毒性肝炎、终末期肝功能衰竭、原发性肺动脉高压、终末期肺病、肾功能衰竭、主动脉手术、慢性再生障碍性贫血、重大器官或骨髓移植、永久性失明、永久性耳聋、失语、昏迷、多发性硬化症、四肢瘫痪、肌肉萎缩症、阿尔茨海默病、重度痴呆、运动神经元疾病、帕金森病、绝症、脑炎、良性脑肿瘤、细菌性脑膜炎、脊髓囊肿病、脑部手术、丧失独立生活能力、输血引起的 HIV 感染、心肌病、重大手术。不在以上之例的重症则依本商会医药援助金组评估后决定。

5 申请者的年龄不能超过政府设定的退休年龄。所有申请必须附上
   a. 由公司董事署名的雇主推荐信、
   b. 经雇主签名和盖章印证的最近三个月的薪水单和公积金缴交记录（BORANG A）、
   c. 经雇主签名和盖章印证的 24 个月以前的其中一个月的公积金缴交记录（BORANG A）、
   d. 附有医院信头的医疗资料（不限于医疗报告）；已经超过 1 年的医疗资料不被接受）。

6 所有申请将由本商会医药援助金组审查及核准，申请者无权提出异议；申请结果将通过电邮通知，请在表格填上有效电邮邮址。一般情况下，申请者在呈交申请表格和全部所须文件后的 14 个工作日内将获得申请是否被批的通知。

7 理事会有绝对权力在不另行通知下修改申请条规，所有申请以最新的条规为准。最新的申请文件可从本商会网站获取。条规中英版本若有出入，将以英文为准。

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RULES & GUIDELINES FOR APPLICATION

1 Only members' employees are eligible to apply for the EMPTA Medical Aid Fund, an applicant must be a Malaysian citizen and must have worked at the member company for at least two years. Applicant who leaves the company and later re-employed again will be treated as new employee from the date of his re-employment. If any transfer or relocation to a subsidiary during the employment, the continuity of employment is considered valid only if the subsidiary is a member company of EMPTA.

2 Employees of new members are eligible to apply for the medical aid when their company memberships reach one year from the date of membership approval.

3 The medical aid amount is RM5,000 for each application. Priority of the medical aid fund is given to the B40 and M40 groups, and is subject to availability of the allocated budget.

4 The medical aid is only for sickness and does not include accidents. The medical aid is confined to stroke, cancer, heart attack, coronary artery by-pass surgery, serious coronary artery disease, angioplasty and other invasive treatment for coronary artery disease, heart valve surgery, fulminant viral hepatitis, end-stage liver failure, primary pulmonary arterial hypertension, end-stage lung disease, kidney failure, surgery to aorta, chronic aplastic anaemia, major organ or bone marrow transplant, blindness - permanent and irreversible deafness - permanent and irreversible, loss of speech, coma, multiple sclerosis, paralysis of limbs, muscular dystrophy, Alzheimer's disease, severe dementia, motor neuron disease, Parkinson's disease, terminal illness, encephalitis, benign brain tumor, bacterial meningitis, medullary cystic disease, brain surgery, loss of independent existence, HIV infection due to blood transfusion, cardiomyopathy, major surgery. Any serious sickness not mentioned above shall be subject to EMPTA's Medical Aid Fund Sub-committee's evaluation.

5 The applicant's age shall not exceed the retirement age set by the government. All applications must be attached with

a. a recommendation letter from the employer signed by the company director;
b. salary slips and EPF contribution record (Borang A) of the latest 3 months certified by the employer;
c. EPF contribution record (Borang A) of any one month more than 24 months ago certified by the employer;
d. the medical documents (not limited to medical report) bearing the letterhead of the hospital; medical documents dated more than 1 year will not be accepted).

6 Review and approval of the applications are at the discretion of EMPTA's Medical Aid Fund Sub-committee and the views of the applicants will not be considered; the outcome of applications will be notified via email, kindly fill in a valid email address in the form. Under normal circumstances, an applicant will be notified about the application outcome within 14 working days after submitting the application form and all required documents.

7 The Committee reserves the right to amend the application rules and guidelines without any prior notice; all applications shall be subject to the latest rules and guidelines. The latest medical aid application form is available at the EMPTA website. Should there be discrepancy between the Chinese version and English version of the rules and guidelines, the English version shall prevail.

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申请表格
APPLICATION FORM

1. 公司名称（中）: _____

Company name （英）: _____

地址 Address: _____

_____

公司注册号码 Company registration number: _____

人事部负责人 HR in-charge person: _____

电话 Tel.: _____

电邮 Email: _____

2. 申请者姓名（中）: _____

Name of Applicant（英）: _____

身份证号码 I.C. number : _____

年龄 Age: _____ 公司职位 Position in company: _____

性别 Sex: _____ 国籍 Nationality: _____

入职日期 Date of employment: _____

住家地址 Residential address: _____

_____

电话 Tel: _____ 电邮 Email : _____

银行户口号码 Bank Account no: _____

银行 Bank: _____

户口持有人名字 Name of account holder: _____

本人完全明白以上所有申请条规和方法，并确定所提供资料为真实。
I fully understand the rules and guidelines for application listed above and confirm that all information submitted is true.

_____
申请者签名
Signature of applicant

本人完全明白以上所有申请条规和方法，并确定申请者所提供的资料为真实。
I fully understand the rules and guidelines for application listed above and confirm that all information submitted by the applicant is true.

_____
公司董事签名和盖章
Signature of company director and stamp

署名者姓名 Name of signatory:
署名者职位 Position of signatory:
日期 Date: