Registration Form of Distant (Remote) Visit								YYYY/MM/DD			
								Weekday:			
App	olicant	ID Number			Date of Birth			Relatio		ionship with	
N	ame								the Detainee		
Address of the Applicant						Approved Date and Period					
			YYYY/MM/DD Period No.								
						Time:					
Detainee		Correction Institution			Register Number   U			nit l		Note	
Fan	nily Memb	er Present		□Yes		$\square No$					
	Call Ti	me		From	rom						
承辦人 (Under taker)		訓導科長 (Section Chief)			副所長 (Deputy Director)			所· (Dire	• -		

Note: Applicants who has been approved for distant (remote) visit are required to fill out the gray chart in detail.