

PENDAFTARAN KELAYAKAN RAWATAN PERUBATAN DI KLINIK PANEL DAN HOSPITAL KERAJAAN BAGI ANAK MASIH BELAJAR / HILANG UPAYA

PANEL CLINIC AND GOVERNMENT HOSPITAL MEDICAL TREATMENT ELIGIBILITY REGISTRATION FOR STUDYING / DISABLED CHILDREN

Masih belajar sepenuh masa dan berumur di bawah 21 tahun. *Still studying in full time mode and below 21 year old.*
 Tiada had umur bagi anak kurang upaya. *No age limit disabled children.*

MAKLUMAT KAKITANGAN <i>Personnel's Information</i>						
Nama Pemohon <i>Applicant's Name</i>						
No. Kad. Pengenalan / Pasport <i>NRIC / Passport Number</i>				Nombor Staf <i>Staff Numbers</i>		
Jawatan <i>Position</i>			Gred <i>Grade</i>			
Pusat Tanggungjawab (PTj) <i>Department / Faculty</i>						
Nombor Telefon <i>Phone Number</i>						
MAKLUMAT TANGGUNGAN <i>Dependent's Information</i>						
Nama <i>Name</i>						
No. Kad. Pengenalan / Pasport <i>NRIC / Passport Number</i>				Umur <i>Age</i>	Tahun <i>Year (s)</i>	Bulan <i>Month(s)</i>
Hubungan <i>Relationship</i>			Nombor Telefon <i>Phone Number</i>			
STATUS TANGGUNGAN <i>Dependent's Status</i>						
Masih Belajar <i>Still Studying</i>			Hilang Upaya <i>Disabled</i>			
Tarikh Pendaftaran <i>Date of Registration</i>			Kategori Ketidakupayaan <i>Disability Category</i>			
Nombor Pendaftaran <i>Registration Number</i>			Nombor Pendaftaran <i>Registration Number</i>			
Tarikh Mula <i>Start Date</i>			Tarikh Dikeluarkan <i>Date of Issue</i>			
Tarikh Tamat <i>End Date</i>			Dikeluarkan oleh <i>Issued by</i>			
Sila sertakan salinan surat tawaran dan bukti pendaftaran / kad pelajar. <i>Please attach a copy of offer letter and a proof of registration or student card.</i> Sila sertakan salinan ***Kad OKU. <i>Please attach a copy of ***OKU Card.</i>						
PERAKUAN <i>Declaration</i>						
Pemohon <i>Applicant</i>			Disokong oleh KPTj <i>Recommended by Head of Department</i>			
Tandatangan <i>Signature</i> :			Tandatangan <i>Signature</i> :			
Tarikh <i>Date</i> :			Tarikh <i>Date</i> :			
Nama <i>Name</i> :			Nama <i>Name</i> :			
Jawatan <i>Position</i> :			Jawatan <i>Position</i> :			
Cop PTj <i>Department Stamp</i> :			Cop PTj <i>Department Stamp</i> :			
SEMAKAN/PENGESAHAN/KELULUSAN PEJABAT PENDAFTAR (*SSKK, **HRM)						
<i>Review /Confirmation/Approval Office of The Registrar (*SSKK, **HRM)</i>						
Disemak dan Pengesahan oleh <i>Reviewed and Certified by</i>			Diluluskan / Tidak Diluluskan oleh <i>Approved/ Not Approved by</i>			
Tandatangan <i>Signature</i> :			Tandatangan <i>Signature</i> :			
Tarikh <i>Date</i> :			Tarikh <i>Date</i> :			
Nama <i>Name</i> :			Nama <i>Name</i> :			
Jawatan <i>Position</i> :			Jawatan <i>Position</i> :			
Cop PTj <i>Department Stamp</i> :			Cop PTj <i>Department Stamp</i> :			

Potong mana yang tidak berkenaan. *Delete as appropriate*

*SSKK : Seksyen Saraan, Kemudahan dan Kebajikan. *Section of Remuneration, Facilities and Welfare;*

**HRM : Bahagian Pengurusan Sumber Manusia. *Human Resource Management;*

*** Kad OKU : Kad Orang Kurang Upaya. *Card of Person with Disabilities;*