**FORMULIR PERMOHONAN PERIJINAN**

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| --- |
| **A.DATA DIRI**Isi dengan huruf cetak/besar |
| Nama | : | ............................................................................... |
| TTL | : | ............................................................................... |
| Alamat Lengkap | : | ............................................................................... |
|  |  | ................................................................................ |
| No HP/Telp/Wa | : | ............................................................................... |
| NIK | : | ............................................................................... |
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| **JENIS PERIJINAN**\*Isi dengan cecklis |
| 1 | NAKES | : |  | 5 | DOKTER KELUARGA | : |  |  |  |
| 2 | PIRT | : |  | 6 | APOTEK/TOKO OBAT | : |  |  |  |
| 3 | PKRT | : |  | 7 | BATRA | : |  |  |  |
| 4 | KLINIK | : |  | 8 | OPTIK | : |  |  |  |
|  |  |  |  | 9 | LAINYA | : | ............................................. |
|  |  |  |  |  |  |  |  |  |  |
|  | KETERANGAN |  |  |  |  |  |  |  |  |
|  | BARU | : |  |  |  |  |  |  |  |
|  | PERPANJANGAN | : |  |  |  |  |  |  |  |

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| TANGGAL PENGAJUAN | PETUGAS YANG MENERIMA | PEMOHON |
|  | Ttd | Ttd |
|  | ................................................. | .................................................... |

**B.NAKES**

|  |  |  |  |
| --- | --- | --- | --- |
| JENIS PROFESI | : | ..................................................... |  |
| IJIN YANG DIURUS | : | SIP | : |  |
|  |  | SIK | : |  |
|  |  | Lainya | : | Sebutkan...................................................................... |
|  |  | Baru | : |  |
|  |  | Perpanjangan | : |  |
|  |  |  |  | No.SIP/SIK lama............................................................ |
| NO.STR | : | ..................................................... |
| TEMPAT BEKERJA | : | .................................................... |  |
| TEMPAT PRAKTIK |  |  | Nama | Alamat |
|  | : | 1 | .......................................... | * ........................................
 |
|  |  | 2 | .......................................... | * .......................................
 |
|  |  | 3 | .......................................... | * ........................................
 |
| PENDIDIKAN | : | Jenjang.................................................... | Nama Universitas......................................................................... |
|  |  |  |  |
| KELENGKAPAN BERKAS | : | 1. Copi Ijazah |  |
|  |  | 2. Copi KTP |  |
|  |  | 3.Rekomendasi Org.Profesi |  |
|  |  | 4.Pas foto 4x6 warna, 6 lembar |  |
|  |  | 5.Copi STR |  |

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| TANGGAL PENGAJUAN | PETUGAS YANG MENERIMA | PEMOHON |
|  | Ttd | Ttd |
|  | ................................................. | .................................................... |