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|  | | | | | | | | **BAHAGIAN SUMBER MANUSIA (BSM), JABATAN PENDAFTAR** |
| **SENARAI SEMAK**  **DOKUMEN PERMOHONAN ELAUN TANGGUNGJAWAB KHAS PEMANDU (ETKP)** |
| |  |  |  |  | | --- | --- | --- | --- | | **NAMA** | : |  |  | | **NO. PEKERJA** | : |  |  | | **JABATAN** | : |  |  |   **ARAHAN:**  Sila lampirkan dokumen untuk urusan permohonan Elaun Tanggungjawab Khas Pemandu (ETKP) dan tandakan ( / ) bagi dokumen yang dilampirkan. | | | | | | | | |
|  |  |  | |  | | | | |
|  |  |  | | Surat Sokongan Fakulti/Jabatan | | | | |
|  |  |  | |  | | | | |
|  |  |  | | Jadual Perakuan | | | | |
|  |  |  | |  | | | | |
|  |  |  | | Deskripsi Tugas (MyJD) | | | | |
|  |  |  | |  | | | | |
|  |  |  | | Salinan lesen memandu pegawai | | | | |
|  |  |  | |  | | | | |
|  |  |  | | Dokumen-dokumen sokongan yang melayakkan (jika ada) | | | | |
|  |  |  | |  | | | | |
|  | **Sila susun mengikut susunan diatas.** | | | | | | | |
|  |  | | | | |  | | |
| **Nota** | | | | | | | **-** Permohonan yang tidak lengkap tidak akan diproses | |
|  |  | |  | |  | | | |

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| **Diterima oleh :**  Nama : …………………………………  Tarikh : …………………………………  Tandatangan : ………………………………… |