**BORANG B**

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**KOD KURSUS: \_\_\_\_D15\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAKLUMAT LENGKAP PESERTA**

1. **MAKLUMAT PESERTA** (*Dilengkapkan oleh ibu/ bapa/ penjaga*)
2. Nama Penuh Peserta : (*Seperti yang tertera di Mykid/ Mykad/ Surat Beranak*)

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1. No. Mykid/ Mykad/ :

Surat Beranak

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1. Alamat Surat :

Menyurat (Terkini)

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1. No. Tel. Bimbit :

Peserta

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1. Bangsa :

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1. Agama :

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| **XXS**  34cm | **XS**  36cm | **S** | **M** | **L** | **XL** | **2XL** | **3XL** | **4XL** | **5XL** |

1. Saiz T-shirt :

*Saiz T-shirt adalah standard (mengikut saiz sekolah biasa)*

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1. Alamat Emel : *sekiranya ada*

1. Maklumat Insuran :

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|  | YA |  |  | TIDAK |  |  |  |

1. Adakah pelajar mempunyai insuran?

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1. Sekiranya ada, sila nyatakan :

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|  | YA |  |  | TIDAK |  |  |  |

1. Adakah pelajar mempunyai alahan makanan?
2. Sekiranya ada, sila nyatakan :

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|  | YA |  |  | TIDAK |  |  |  |

1. Keperluan makanan vegetarian :
2. Pernahkan pelajar menghidap penyakit – penyakit seperti yang dinyatakan di bawah?

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* Lelah/ Semput :

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* Migrain :

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* Gastrik :

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* Penyakit Kulit :

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* Penyakit Berjangkit :

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* Lain – Lain :

*sila nyatakan jenis penyakit*

\*Sila sertakan laporan kesihatan daripada doktor (sekiranya ada) dan peserta **DIWAJIBKAN MEMBAWA SENDIRI UBAT-UBATAN** kerana hanya ubat-ubatan asas sahaja yang akan disediakan oleh pihak PPCS\*

1. Program PPCS yang : *sila tandakan* ***/*** *pada jadual di bawah sekiranya pernah menghadiri program PPCS*

pernah dihadiri

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| --- | --- | --- | --- |
| Bil | Program | Status  (/) | Kursus yang telah diambil |
| 1 | PPCS 2009 |  |  |
| 2 | PPCS 2010 |  |  |
| 3 | PPCS 2011 |  |  |
| 4 | PPCS 2012 |  |  |
| 5 | PPCS Sesi Mei – Jun 2013 |  |  |
| 6 | PPCS Sesi Nov – Dis 2013 |  |  |
| 7 | PPCS Sesi Jun 2014 |  |  |
| 8 | PPCS Sesi Dis 2014 |  |  |
| 9 | PPCS Sesi Jun 2015 |  |  |

1. **BUTIRAN BAPA/ PENJAGA** 
   1. Nama Penuh Bapa/ Penjaga:

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* 1. No. Kad Pengenalan:

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* 1. No. Telefon (rumah):

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* 1. No. Telefon (bimbit):
  2. Alamat Surat-Menyurat:

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* 1. Alamat Emel:

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1. Pekerjaan:

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1. No. Telefon Pejabat:

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| R | M |  |  |  |  |  |  |  |

1. Jumlah Pendapatan:

**Nota:**

1. Sila serta salinan slip gaji yang **HANYA** telah disahkan oleh pengetua/ guru besar sekolah peserta sahaja
2. Sekiranya tidak mempunyai slip gaji, ibu bapa hendaklah membuat satu surat pengesahan/ pengakuan rasmi dan **HANYA** disahkan oleh pengetua/ guru besar sekolah peserta sahaja
3. **BUTIRAN IBU**
4. Nama Penuh Ibu :

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1. No. Kad Pengenalan:

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1. No. Telefon (rumah):

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1. No. Telefon (bimbit):
2. Alamat Email:

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1. Pekerjaan:

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1. No. Telefon Pejabat:

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1. Jumlah Pendapatan:

**Nota:**

1. Sila serta salinan slip gaji yang **HANYA** telah disahkan oleh pengetua/ guru besar sekolah peserta sahaja
2. Sekiranya tidak mempunyai slip gaji, ibu bapa hendaklah membuat satu surat pengesahan/ pengakuan rasmi dan **HANYA** disahkan oleh pengetua/ guru besar sekolah peserta sahaja

**PENGAKUAN IBU/ BAPA / PENJAGA**

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| Saya, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Ibu / Bapa / Penjaga)\*  No. Kad Pengenalan \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Ibu / Bapa / Penjaga)\*  memperakukan bahawa semua maklumat yang diberikan adalah benar. |

Sekian, terima kasih.

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| Tandatangan Ibu/ Bapa/ Penjaga | | | Pengesahan Pengetua/ Guru Besar | | |
| Nama | : |  | Nama | : |  |
| No. Kad Pengenalan | : |  | Cop Rasmi | : |  |
| Tarikh | : |  | Tarikh | : |  |