**SURAT PERNYATAAN**

**MELAKUKAN KEGIATAN PENGELOLAAN ARSIP DINAMIS**

|  |  |  |  |
| --- | --- | --- | --- |
| Yang bertanda tangan dibawah ini : | | | |
|  | Nama | : | .................................................................................... |
|  | NIP | : | .................................................................................... |
|  | Pangkat/golongan ruang/TMT | : | .................................................................................... |
|  | Jabatan | : | .................................................................................... |
|  | Unit Kerja | : | .................................................................................... |

|  |  |  |  |
| --- | --- | --- | --- |
| Menyatakan bahwa : | | | |
|  | Nama | : | .................................................................................... |
|  | NIP | : | .................................................................................... |
|  | Pangkat/golongan ruang/TMT | : | .................................................................................... |
|  | Jabatan | : | .................................................................................... |
|  | Unit Kerja | : | .................................................................................... |

Telah melakukan kegiatan Pengelolaan Arsip Dinamis sebagai berikut:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| No | Uraian Kegiatan | Tanggal | Kuantitas | Bukti Kerja | Dasar Penugasan | Nilai  Kualitas/Mutu |
| 1 | 2 | 3 | 4 | 5 | 6 |  |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| dst |  |  |  |  |  |  |

Demikian pernyataan ini dibuat untuk dapat dipergunakan sebagaimana mestinya.

………………..,………………………..

Atasan Langsung

NIP

**SURAT PERNYATAAN**

**MELAKUKAN KEGIATAN PENGELOLAAN ARSIP STATIS**

|  |  |  |  |
| --- | --- | --- | --- |
| Yang bertanda tangan dibawah ini : | | | |
|  | Nama | : | .................................................................................... |
|  | NIP | : | .................................................................................... |
|  | Pangkat/golongan ruang/TMT | : | .................................................................................... |
|  | Jabatan | : | .................................................................................... |
|  | Unit Kerja | : | .................................................................................... |

|  |  |  |  |
| --- | --- | --- | --- |
| Menyatakan bahwa : | | | |
|  | Nama | : | .................................................................................... |
|  | NIP | : | .................................................................................... |
|  | Pangkat/golongan ruang/TMT | : | .................................................................................... |
|  | Jabatan | : | .................................................................................... |
|  | Unit Kerja | : | .................................................................................... |

Telah melakukan kegiatan Pengelolaan Arsip Statis sebagai berikut:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| No | Uraian Kegiatan | Tanggal | Kuantitas | Bukti Kerja | Dasar Penugasan | Nilai  Kualitas/Mutu |
| 1 | 2 | 3 | 4 | 5 | 6 |  |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| dst |  |  |  |  |  |  |

Demikian pernyataan ini dibuat untuk dapat dipergunakan sebagaimana mestinya.

………………..,………………………..

Atasan Langsung NIP

**SURAT PERNYATAAN**

**MELAKUKAN KEGIATAN PEMBINAAN KEARSIPAN**

|  |  |  |  |
| --- | --- | --- | --- |
| Yang bertanda tangan dibawah ini : | | | |
|  | Nama | : |  |
|  | NIP | : |  |
|  | Pangkat/golongan ruang/TMT | : |  |
|  | Jabatan | : |  |
|  | Unit Kerja | : |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Menyatakan bahwa : | | | |
|  | Nama | : |  |
|  | NIP | : |  |
|  | Pangkat/golongan ruang/TMT | : |  |
|  | Jabatan | : |  |
|  | Unit Kerja | : |  |

Telah melakukan kegiatan Pembinaan Kearsipan sebagai berikut:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| No | Uraian Kegiatan | Tanggal | Kuantitas | Bukti Kerja | Dasar Penugasan | Nilai  Kualitas/Mutu |
| 1 | 2 | 3 | 4 | 5 | 6 |  |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| dst |  |  |  |  |  |  |

Demikian pernyataan ini dibuat untuk dapat dipergunakan sebagaimana mestinya.

………………..,………………………..

Atasan Langsung NIP

**SURAT PERNYATAAN**

**MELAKUKAN KEGIATAN PENGOLAHAN DAN PENYAJIAN ARSIP MENJADI INFORMASI**

|  |  |  |  |
| --- | --- | --- | --- |
| Yang bertanda tangan dibawah ini : | | | |
|  | Nama | : |  |
|  | NIP | : |  |
|  | Pangkat/golongan ruang/TMT | : |  |
|  | Jabatan | : |  |
|  | Unit Kerja | : |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Menyatakan bahwa : | | | |
|  | Nama | : |  |
|  | NIP | : |  |
|  | Pangkat/golongan ruang/TMT | : |  |
|  | Jabatan | : |  |
|  | Unit Kerja | : |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Telah melakukan kegiatan Pengolahan dan Penyajian Arsip Menjadi Informasisebagai berikut :   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | No | Uraian Kegiatan | Tanggal | Kuantitas | Bukti Kerja | Dasar Penugasan | Nilai  Kualitas/Mutu | | 1 | 2 | 3 | 4 | 5 | 6 |  | | 1. |  |  |  |  |  |  | | 2. |  |  |  |  |  |  | | 3. |  |  |  |  |  |  | | 4. |  |  |  |  |  |  | | 5. |  |  |  |  |  |  | |

Demikian pernyataan ini dibuat untuk dapat dipergunakan sebagaimana mestinya.

………………..,………………………..

Atasan Langsung NIP

**SURAT PERNYATAAN**

**MELAKUKAN KEGIATAN TAMBAHAN**

|  |  |  |  |
| --- | --- | --- | --- |
| Yang bertanda tangan dibawah ini : | | | |
|  | Nama | : |  |
|  | NIP | : |  |
|  | Pangkat/golongan ruang/TMT | : |  |
|  | Jabatan | : |  |
|  | Unit Kerja | : |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Menyatakan bahwa : | | | |
|  | Nama | : |  |
|  | NIP | : |  |
|  | Pangkat/golongan ruang/TMT | : |  |
|  | Jabatan | : |  |
|  | Unit Kerja | : |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Telah melakukan kegiatan Tambahan sebagai berikut :   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | No | Uraian Kegiatan | Tanggal | Kuantitas | Bukti Kerja | Dasar Penugasan | Nilai  Kualitas/Mutu | | 1 | 2 | 3 | 4 | 5 | 6 |  | | 1. |  |  |  |  |  |  | | 2. |  |  |  |  |  |  | | 3. |  |  |  |  |  |  | | 4. |  |  |  |  |  |  | | 5. |  |  |  |  |  |  | | 6. |  |  |  |  |  |  | |

Demikian pernyataan ini dibuat untuk dapat dipergunakan sebagaimana mestinya.

………………..,………………………..

Atasan Langsung NIP