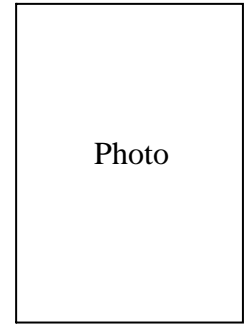


APPLICATION FORM FOR HAEMODIALYSIS INDUCTION COURSE

PERSONAL PARTICULARS

Name (Mr/Mrs/Ms) : _____
 (As per NRIC) _____
 NRIC No (New) : _____
 Home address : _____



Tel no : (H) _____ (H/P) _____ E-mail : _____
 Age : _____ Sex : Male Female
 Nationality : _____ Race : _____
 Marital Status : Single Married Widowed Divorced

NEXT OF KIN PARTICULARS

Name (Mr/Mrs/Ms) : _____
 Relationship : _____
 Address : _____
 Tel no : (H) _____ (H/P) _____

QUALIFICATIONS

Education : SPM Diploma of Nursing (Please attach photocopy of certificate)

Language Literacy

Language / Dialect	Indicate Good, Fair or Poor		
	Speak	Write	Read

Clinical / Haemodialysis Experience

Employer	Year	
	From	To

HEPATITIS STATUS

Hepatitis Bs Ag : Non-reactive Reactive

Hepatitis B Ab : _____ IU/L

Hepatitis C : Non-reactive Reactive

HIV : Non-reactive Reactive

**Please attach photocopies of latest blood test results (Validity : 6 months from date of application)*

REFEREES (List 2 persons excluding relatives and former employer)

Name	Address & Tel No	Occupation	Years Known

Accommodation Required : YES NO

(For outstation candidates only)

ENDORSEMENT BY PRESENT EMPLOYER

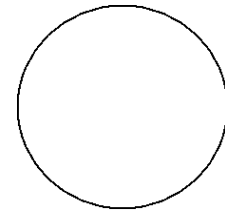
Name : _____

Designation : _____

Company : _____

Address : _____

Tel No : (O) _____ (Fax) _____



Company Rubber Stamp

DECLARATION

I/We declare the information given in this application is true and complete. I/We understand any misleading information or willful omission is sufficient reason for rejection of admission to the course.

I/We hereby declare that I/we have read and understood the contents of the privacy notice of NKF displayed on the NKF website at www.nkf.org.my and confirm my/our consent for NKF to use my/our personal data for the purposes and to the parties stated in the privacy notice.

Signature of Employer

Date : _____

Signature of Applicant

Date : _____