**KETERANGAN MENGENAI SIJIL SAKIT**

**Nama :................................................................................................  
Jawatan :................................................................................................   
No.KPN :................................................................................................   
Cuti Sakit Selama :.........hari mula daripada....................hingga.......................**

**..........................................................................  
 T/tangan Ketua Bahagian/Cawangan**

**.........................................................................  
 T/tangan Pt.Cuti.**

[ ] > ***HRMIS telah dilaksanakan***