



## Bahagian Perubatan Tradisional & Komplementari

### SENARAI SEMAK PERMOHONAN PEGAWAI DAGANG (PENGAMAL) CHECKLIST FOR APPLICATION OF EXPATRIATE (PRACTITIONER)

PTK-PD1

Senarai semak untuk diisi oleh pemohon (sila tanda ✓)  
Checklist to be filled by applicant (please tick ✓)

Tarikh Permohonan : \_\_\_\_\_  
*Date of Application*  
Nama syarikat : \_\_\_\_\_  
*Name of Company*  
Jenis Amalan : \_\_\_\_\_  
*Type of Practice*  
Tel Pejabat/ Tel Bimbit : \_\_\_\_\_  
*Tel (Office & Mobile)*

Dokumen untuk syarikat

*Documents for the company*

No.	Dokumen <i>Document</i>	Pemohon <i>Applicant</i>	For Office <i>Use</i>
1.	Memorandum and Articles of Association <i>Memorandum and Articles of Association</i>		
2.	Pendaftaran dengan Suruhanjaya Syarikat Malaysia <i>Registration with Companies Commission of Malaysia</i>		
	Borang 9 dan Borang 12 (jika ada pertukaran nama syarikat) <i>Form 9 and Form 12 (if there's change of company's name)</i>		
	Borang 24 <i>Form 24</i>		
	Borang 44 <i>Form 44</i>		
	Borang 49 <i>Form 49</i>		
	Dokumen lain yang berkaitan <i>Other relevant documents</i>		
3.	Lesen premis / perniagaan dari Pihak Berkuasa Tempatan (PBT) yang berkaitan <i>Business licence from the relevant local council</i>		
4.	Borang permohonan untuk syarikat <i>Application form for company</i>		
5.	Surat sokongan dari Badan Pengamal berkaitan <i>Supporting letter from relevant Practitioner's Body</i>		
6.	Sampul surat beralamat sendiri berserta pos daftar Malaysia (jika pemohon memerlukan BPTK untuk memposkan surat sokongan) <i>Self addressed envelope with Malaysian registered pos (if applicant needs T&amp;CMD to post the recommendation letter)</i>		



## Bahagian Perubatan Tradisional & Komplementari

### SENARAI SEMAK PERMOHONAN PEGAWAI DAGANG (PENGAMAL) CHECKLIST FOR APPLICATION OF EXPATRIATE (PRACTITIONER)

PTK-PD1

#### Dokumen untuk pengiklanan

##### *Documents for the advertisement*

No.	Dokumen <i>Document</i>	Pemohon <i>Applicant</i>	For Office Use
7.	Tiga iklan seperti yang dinyatakan dalam garispanduan permohonan Pegawai Dagang (sila kemukakan salinan iklan dalam bentuk 1 mukasurat penuh, fotokopi boleh diterima)  <i>Three advertisements as stated in the Foreign Practitioner Application Guidelines (Please submit the advertisement in full page, photocopy can be accepted)</i>		

#### Dokumen untuk Pegawai Dagang (Pengamal)

##### *Documents for expatriate (practitioner)*

No.	Dokumen <i>Document</i>	Pemohon <i>Applicant</i>	For Office Use
8.	Borang permohonan untuk setiap pemohon  <i>Application form for each applicant</i>		
9.	Salinan sijil kelahiran atau kad pengenalan atau pasport  <i>Copy of birth certificate or citizenship or passport</i>		
10.	Salinan pas pengajian (untuk permohonan pembaharuan)  <i>Copy of employment pass (for renewal application)</i>		
11.	Salinan sijil kelayakan minima atau Diploma atau Ijazah Sarjana Muda (Kelayakan setiap Pegawai Dagang perlu dikenalpasti dan disahkan oleh negara asal yang mengeluarkan sijil. Setiap salinan dokumen mestilah disahkan sebagai salinan asal oleh pihak berkuasa yang berkaitan dari negara asal)  <i>Copy of qualification of a minimum standard of certificates or diploma or degree (Qualification of each practitioner must be identified and certified by the country from which the certificate is issued from. Copies of each document must be certified as true copy by their related ministry)</i>		
12.	Suratakuan pengalaman yang telah disahkan oleh majikan terdahulu  <i>Confirmation letter on working experience certified by previous employer</i>		
13.	Biodata / Resume / CV  <i>Biodata / Resume / CV</i>		



## Bahagian Perubatan Tradisional & Komplementari

### SENARAI SEMAK PERMOHONAN PEGAWAI DAGANG (PENGAMAL) CHECKLIST FOR APPLICATION OF EXPATRIATE (PRACTITIONER)

PTK-PD1

Dokumen untuk Pegawai Dagang (Jawatan Pengurusan)

*Documents for expatriate (administrative position)*

No.	Dokumen <i>Document</i>	Pemohon <i>Applicant</i>	For Office Use
14.	Borang permohonan untuk setiap pemohon <i>Application form for each applicant</i>		
15.	Salinan sijil kelahiran atau kad pengenalan atau pasport <i>Copy of birth certificate or citizenship or passport</i>		
16.	Salinan pas penggajian (untuk permohonan pembaharuan) <i>Copy of employment pass (for renewal application)</i>		
17.	Salinan sijil kelayakan <i>Copy of qualification</i>		
18.	Biodata / Resume / CV <i>Biodata / Resume / CV</i>		
29.	Senarai tugas pemohon (ianya mesti dikenalpasti dan disahkan oleh pengarah syarikat yang mengeluarkannya) <i>Job description of each applicant (must be identified and certified by the Company Director from which it is issued)</i>		

\*Permohonan hanya akan diproses jika dokumen yang diperlukan dikemukakan

\*\*Dokumen yang diperlukan tertakluk kepada perubahan dari masa ke semasa tanpa sebarang notis awal kepada pemohon

\* *Application will only be processed provided that the documents required are submitted.*

\* *The required documents are subject to alteration from time to time without prior notice to applicants.*



## Bahagian Perubatan Tradisional & Komplementari

### SENARAI SEMAK PERMOHONAN PEGAWAI DAGANG (PENGAMAL) CHECKLIST FOR APPLICATION OF EXPATRIATE (PRACTITIONER)

PTK-PD1

<b>First Checking</b>	: <b>Administrative Assistant</b>	
<b>Comments</b>	: <b>Documents required were complete and escalate to 1<sup>st</sup> evaluation</b>	<input type="checkbox"/>
	: <b>Documents required were incomplete (<i>please specify</i>)</b>	<input type="checkbox"/>
<hr/> <hr/> <hr/> <hr/>		
<b>Signature &amp; Date</b>	:	<hr/>

<b>First Evaluation</b>	: <b>Assistant Director</b>	
<b>Comments</b>	: <b>Fulfilled the requirements of guideline and escalate to 2<sup>nd</sup> evaluation</b>	<input type="checkbox"/>
	: <b>Do not fulfill the requirements of guideline (<i>please specify</i>)</b>	<input type="checkbox"/>
<hr/> <hr/> <hr/> <hr/>		
<b>Signature &amp; Date</b>	:	<hr/>

<b>Second Evaluation</b>	: <b>Senior Principal Assistant Director / Principal Assistant Director / Senior Assistant Director</b>	
<b>Comments</b>	: <b>Fulfilled the requirements of guideline and escalate to JKPPD</b>	<input type="checkbox"/>
	: <b>Do not fulfill the requirements of guideline (<i>please specify</i>)</b>	<input type="checkbox"/>
<hr/> <hr/> <hr/> <hr/>		
<b>Signature &amp; Date</b>	:	<hr/>



## Bahagian Perubatan Tradisional & Komplementari

### BORANG PERMOHONAN UNTUK SYARIKAT APPLICATION FORM FOR COMPANY

Tarikh permohonan: \_\_\_\_\_  
Application date:

Kepada: Bahagian Perubatan Tradisional dan Komplementari (BPTK)  
To: KEMENTERIAN KESIHATAN MALAYSIA  
BILIK PELAWAT, BLOK E  
JALAN CENDERASARI  
50590 Kuala Lumpur, Malaysia.

#### Permohonan Pegawai Dagang untuk Perubatan Tradisional dan Komplementari (T&CM)

*Application for Foreign Traditional and Complementary Medicine Practitioner*

Kami, Syarikat/Agensi \_\_\_\_\_

*We, company/agency*

ingin memohon Pegawai Dagang untuk berkerja di syarikat/ agensi kami. Butir-butirnya adalah seperti berikut:

*would like to hire foreign Traditional and Complementary Medicine practitioner/s for our company. Details are as follows:*

Jenis Permohonan :  Baru  Pembaharuan  
*Type of Application : New Renewal*

<b>Nama Syarikat/ Agensi</b> <i>Name of the company/ agency</i>			
<b>No Pendaftaran Syarikat/ Agensi</b> <i>Company/ agency registration number</i>			
<b>Alamat Syarikat/ Agensi</b> <i>Company/ agency address</i>			
<b>No Tel/Mobile</b> <i>Telephone/ mobile phone number</i>		<b>No Faks</b> <i>Fax Number</i>	
<b>Emel</b> <i>E-mail</i>			
<b>Jenis Amalan</b> <i>Type of practice</i>			
<b>Bilangan Pegawai Dagang yang dipohon</b> <i>Number of foreign practitioner/s</i>			
<b>Nama Pegawai Dagang</b> <i>Name of Foreign Practitioner(s)</i>	<b>Jawatan</b> <i>Position</i>	<b>Umur</b> <i>Age</i>	<b>Kewarganegaraan</b> <i>Nationality</i>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____
8. _____	_____	_____	_____
9. _____	_____	_____	_____
10. _____	_____	_____	_____



## Bahagian Perubatan Tradisional & Komplementari

### BORANG PERMOHONAN UNTUK SYARIKAT APPLICATION FORM FOR COMPANY

<b>Tujuan Pengambilan Pegawai Dagang</b> <i>Purpose of the Application</i>	
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2. Bersama-sama ini disertakan dokumen-dokumen yang diperlukan seperti yang disenaraikan dalam senarai semak PTK-PD1  
*Documents required as listed in checklist PTK-PD1 were submitted*

Sekian, terima kasih  
*Thank you.*

Saya mengaku bahawa keterangan-keterangan yang diberikan dalam borang ini adalah tepat dan benar. Jika didapati ada keterangan-keterangan yang tidak benar, permohonan saya ini akan dibatalkan.  
*I, hereby certify that the statements on this application are correct and true to the best of my knowledge, and I agree and understand that any falsification of information herein will cause cancellation on my application*

\_\_\_\_\_  
Tandatangan, Nama Penuh dan Cop Syarikat  
*Signature, Full name and Company Stamp*

\_\_\_\_\_  
Tarikh  
*Date*

**Sk** **Badan Pengamal yang berkaitan (sila tanda ✓)**  
**Cc** **Related Practitioner Body (please tick ✓)**

<input type="checkbox"/>	Persekutuan Perubatan Tradisional Melayu Malaysia (PUTRAMAS)
<input type="checkbox"/>	Federation of Chinese Physicians and Medicine-Dealers Association of Malaysia (FCPMDAM)
<input type="checkbox"/>	Federation of Chinese Physicians and Acupuncturists Association of Malaysia (FCPAAM)
<input type="checkbox"/>	Malaysian Chinese Medical Associations (MCMA)
<input type="checkbox"/>	Pertubuhan Perubatan Tradisional India Malaysia (PEPTIM)
<input type="checkbox"/>	Majlis Perubatan Honeopathy Malaysia (MPHM)



## Bahagian Perubatan Tradisional & Komplementari

### BORANG PERMOHONAN INDIVIDU INDIVIDUAL APPLICATION FORM

Tarikh permohonan: \_\_\_\_\_  
*Application date:*

**Kepada: Bahagian Perubatan Tradisional dan Komplementari (BPTK)**  
**To: KEMENTERIAN KESIHATAN MALAYSIA**  
**BILIK PELAWAT, BLOK E**  
**JALAN CENDERASARI**  
**50590 Kuala Lumpur, Malaysia.**

**Gambar  
ukuran  
pasport  
terkini**  
*Latest  
Passport Size  
Photo*

#### **Permohonan Pegawai Dagang untuk Perubatan Tradisional dan Komplementari (T&CM)**

*Application for Foreign Traditional and Complementary Medicine Practitioner*

Saya seperti nama dibawah ingin memohon bekerja sebagai Pengamal Perubatan Tradisional dan Komplementari. Butiran saya adalah seperti berikut:

*I would like to apply as Foreign Traditional and Complementary Medicine Practitioner. My details are as follows:*

Nama Pemohon (seperti dalam pasport) <i>Applicant's name (as in the passport)</i>			
No Pasport <i>Passport number</i>		Warganegara <i>Nationality</i>	
Umur <i>Age</i>		Jantina <i>Sex</i>	
Tarikh lahir <i>Date of birth</i>		No. Telefon <i>Telephone number</i>	
Alamat tempat tinggal <i>Current Address</i>			
Alamat tempat bekerja (di Malaysia) <i>Work place address (in Malaysia)</i>			
Jenis amalan <i>Type of practice</i>			
Sijil tertinggi dalam T&CM <i>Higher education level in Traditional &amp; Complementary Medicine</i>			
Institusi / Universiti yang mengeluarkan sijil dan tahun <i>Institute/ University and Year of graduation</i>			

3. Bersama-sama ini disertakan dokumen-dokumen yang diperlukan seperti yang disenaraikan dalam senarai semak PTK-PD1  
*Documents required as listed in checklist PTK-PD1 were submitted*

Sekian, terima kasih  
*Thank you.*

Saya mengaku bahawa keterangan-keterangan yang diberikan dalam borang ini adalah tepat dan benar. Jika didapati ada keterangan-keterangan yang tidak benar, permohonan saya ini akan dibatalkan.

*I, hereby certify that the statements on this application are correct and true to the best of my knowledge, and I agree and understand that any falsification of information herein will cause cancellation on my application*

\_\_\_\_\_  
*Tandatangan dan Nama Penuh Pemohon*  
*Applicant's Signature and Full Name*

\_\_\_\_\_  
*Tarikh*  
*Date*