 **PEMERINTAH PROVINSI KEPULAUAN BANGKA BELITUNG**

**DINAS PENDIDIKAN**

UNIT PELAKSANA TEKNIS DINAS SATUAN PENDIDIKAN

SLB NEGERI SUNGAILIAT

Jl. Pemuda Sungailiat Kabupaten Bangka ☎ (0717) 94328, Kode Pos 33211

Nomor :

Tanggal :

Waktu :

FORMULIR PENDAFTARAN

PENERIMAAN PESERTA DIDIK BARU (PPDB) SLB

TAHUN AJARAN 2023/2024

PAS Photo

3X4

|  |  |  |  |
| --- | --- | --- | --- |
| **A.** | **KETERANGAN PRIBADI SISWA** |  |  |
|  | 1. | Nama lengkap calon siswa / i  | : | .............................................................................................................. |
|  | 2. | Nama Panggilan  | : | .............................................................................................................. |
|  | 3. | Tempat tanggal lahir  | : | .............................................................................................................. |
|  | 4. | Jenis kelamin  | : | .............................................................................................................. |
|  | 5. | Agama  | : | .............................................................................................................. |
|  | 6. | Kewarganegaraan  | : | .............................................................................................................. |
|  | 7. | Anak yang ke  | : | .............................................................................................................. |
|  | 8. | Jumlah saudara kandung | : | .............................................................................................................. |
|  | 9. | Jumlah saudara  | : | .............................................................................................................. |
|  | 10. | Tinggi badan  | : | .............................................................................................................. |
|  | 11. | Berat badan  | : | .............................................................................................................. |
|  | 12. | Golongan darah  | : | .............................................................................................................. |
|  | 13. | Surat keterangan dari | : |  |
|  |  | a. Psikolog  | : | Ada / Tidak ada \* |
|  |  | b. Psikiater  | : | Ada / Tidak ada \* |
|  |  | c. Dokter THT  | : | Ada / Tidak ada \* |
|  |  | d. Dokter Anak  | : | Ada / Tidak ada \* |
|  |  | e. Dokter Mata  | : | Ada / Tidak ada \* |
|  |  | f. Dokter Umum  | : | Ada / Tidak ada \* |
|  |  | g. Lain-lain  | : | Ada / Tidak ada \* |
|  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **B.** | **KETERANGAN ORANG TUA** |  |  |
|  | 1. | Nama Ayah  | : | .............................................................................................................. |
|  | 2. | Tempat Tanggal Lahir  | : | .............................................................................................................. |
|  | 3. | Pendidikan Akhir  | : | .............................................................................................................. |
|  | 4. | Pekerjaan Ayah  | : | .............................................................................................................. |
|  | 5. | Penghasilan Perbulan  | : | .............................................................................................................. |
|  | 6. | Nama Ibu  | : | .............................................................................................................. |
|  | 7. | Tempat Tanggal Lahir  | : | .............................................................................................................. |
|  | 8. | Pendidikan Akhir  | : | .............................................................................................................. |
|  | 9. | Pekerjaan Ibu  | : | .............................................................................................................. |
|  | 10. | Penghasilan perbulan  | : | .............................................................................................................. |
|  | 11. | Nomor telepon kantor Ayah | : | .............................................................................................................. |
|  | 12. | Nomor telepon kantor Ibu | : | .............................................................................................................. |
|  | 13. | Alamat Lengkap Ayah/Ibu | : | .............................................................................................................. |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **C.** | **KETERANGAN WALI CALON SISWA (APABILA ADA)** |
|  | 1. | Nama Wali  | : | .............................................................................................................. |
|  | 2. | Tempat Tanggal Lahir  | : | .............................................................................................................. |
|  | 3. | Pendidikan Akhir  | : | .............................................................................................................. |
|  | 4. | Pekerjaan Wali | : | .............................................................................................................. |
|  | 5. | Penghasilan Perbulan  | : | .............................................................................................................. |
|  | 6. | Nomor telepon kantor Wali | : | .............................................................................................................. |
|  | 7. | Nomor telepon kantor Ibu | : | .............................................................................................................. |
|  | 8. | Alamat Lengkap Wali | : | .............................................................................................................. |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **D.** | **ASAL MULA CALON SISWA** |
|  | 1. | Masuk Sekolah ini sebagai  | : | Siswa / i baru /Pindahan\* |
|  | 2. | Asal Anak | : | Rumah tangga/Panti Asuhan\* |
|  | 3. | Jika Pindahan, dari |  |  |
|  |  | a. Nama Sekolah asal | : | .............................................................................................................. |
|  |  | b. Kelas | : | .............................................................................................................. |
|  |  | c. Tanggal Pindah | : | .............................................................................................................. |
|  |  | d. Alasan Pindah | : | .............................................................................................................. |
|  | 4. | Diterima/ ditolak | : | .............................................................................................................. |
|  | 5. | Diterima di Sekolah ini |  |  |
|  |  | a. Tanggal | : | .............................................................................................................. |
|  |  | b. Di kelas | : | .............................................................................................................. |
|  | 6. | Jika ditolak | : | .............................................................................................................. |

|  |  |
| --- | --- |
| **E.** | **PERSYARATAN** |
|  | 1. | Fotocopy Akte Kelahiran satu ( 1 ) Lembar. |
|  | 2.3.4. | Pas Foto ukuran 3 X 4 sebanyak 4 Lembar.Pas Foto ukuran 2 X 3 sebanyak 4 LembarSurat Keterangan Dokter. |
|  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |

|  |  |
| --- | --- |
|  |  |
|  |  |  |
|  | 4. | Stopmap masing-masing satu lembar | : | Warna **biru** untuk Tunarungu |
|  |  |  | : | Warna **merah** untuk Tunagrahita |
|  |  |  | : | Warna **kuning** untuk Tunanetra |
|  |  |  | : | Warna **hijau** untuk Tunadaksa |
|  | 5. | Menyiapkan pakaian seragam sekolah |

Demikian data sebenarnya dan dapat dipertanggung jawabkan dan kami siap menerima sanksi sesuai ketentuan peraturan yang berlaku.

................................................ 2023

Mengetahui,

Orang Tua

................................................................\*\*)

Calon Siswa,

..................................................................\*\*)

 Ket.

• \* Coret yang tidak perlu

• \*\* Tanda tangan dan nama jelas