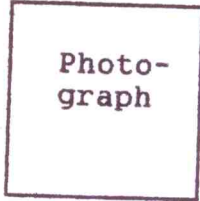


FORM 5
(Regulation 20)

OPTICAL ACT 1991
(Subsection 18(1))

OPTICAL REGULATIONS 1994



APPLICATION FOR REGISTRATION OF OPTICIAN

1. Full name of applicant:.....
2. Identity Card No:.....
3. Citizenship status:.....
4. Date of birth:.....
5. (a) Residential address:.....
.....
.....
- (b) Address for postal communication (if different):
.....
.....
6. Particulars of qualification:
 - (a) Description of qualification (in full)
 - (b) Institution which granted qualification.....
 - (c) Date of qualification
7. I attach the following documents in proof of my qualification and in support of this application:
 - (a) certified true copy of Citizenship Certificate (if applicable);
 - (b) certified true copies of original diplomas, certificates etc.;

(c)
.....
.....

Date:.....

.....
Signature of applicant

DECLARATION

I, (full name)
the above-named applicant, hereby declare that the
particulars stated in this application are true and correct
and the documents attached are certified true copies of
original documents which relate to me. I have not at any time
been found guilty of an offence involving fraud, dishonesty
or moral turpitude, or an offence punishable with
imprisonment (whether in itself only or in addition to or in
lieu of a fine) for a term of one year or upward.

Date:

.....
Signature of applicant

CERTIFICATE OF IDENTITY

I, (full name)
of (full address)
..... being
(professional status)
do hereby certify that (name of applicant)
..... whose application
for registration as a is submitted
above is known to me personally and is in fact the person
whose name appears on this application.

.....
(Signature)
Fully Registered Optician/
Optometrist or Advocate
and Solicitor or an
Officer in the Managerial
and Professional Group of
the Public Service

Date:

Senarai Dokumen Yang Diperlukan Semasa Memohon Pendaftaran Penuh Dengan Majlis Optik Malaysia Bagi Juruoptik Yang Mempunyai Kelulusan Mengikut Jadual Pertama (Seksyen 18(1) Akta Optik 1991)

Bil	Dokumen Yang Diperlukan	Catatan
1.	Salinan Sijil Kerakyatan (sekiranya berkenaan)	Salinan diakui sah pada setiap muka surat dan ditandatangani oleh: i Peguambela / Peguamcara; atau ii Pegawai Kerajaan Kategori I-IV (SSB) (Pegawai Pengurusan dan Profesional dalam Perkhidmatan Awam); atau iii Pesuruhjaya Sumpah
2.	Salinan Kad Pengenalan	
3.	Salinan Sijil Kelahiran / Surat Beranak	
4.	Salinan Ijazah / Diploma / Sijil*	
5.	Salinan Sijil Pendaftaran Dari Majlis Luar Negara (sekiranya ada)	
6.	Surat Akuan daripada Pesuruhjaya Sumpah Sekiranya nama yang dicetak di atas Ijazah / Diploma / Sijil berbeza seperti di dalam Kad Pengenalan	
7.	Salinan dokumen/surat sokongan lain (sekiranya ada)	
8.	Borang 5 (Borang Permohonan Untuk Pendaftaran Penuh Juruoptik – dalam <u>dua (2)</u> Salinan)	Perakuan pengenalan mestilah ditandatangani oleh: i Juruoptik Berdaftar sepenuhnya; atau ii Optometris Berdaftar sepenuhnya; atau iii Peguambela / Peguamcara; atau iv Pegawai Kerajaan Kategori I-IV (SSB) (Pegawai Pengurusan dan Profesional dalam Perkhidmatan Awam)
9.	Dua (2) keping Gambar Berukuran Passport (Warna) – satu keping ditampal dalam setiap salinan Borang 5	
10.	Wang Pos / Kiriman Wang / Bank Draft bernilai RM100/- dialamatkan kepada: Pendaftar Majlis Optik Malaysia Kementerian Kesihatan Malaysia Aras 2, Blok E1, Kompleks E, Pusat Pentadbiran Kerajaan Persekutuan 62590 Putrajaya	

Nota:

1. Ijazah/Diploma/Sijil ASAL hendaklah dibawa bersama semasa pengesahan salinan dibuat untuk tujuan semakan.
2. Optometris/Juruoptik yang telah berdaftar dengan Majlis Optik Malaysia perlu mencatatkan No. K/P, no. Telefon dan No. Pendaftaran Penuh.
3. Cop rasmi nama pegawai, jawatan dan jabatan, No. K/P pegawai dan no. telefon perlu dicatat.