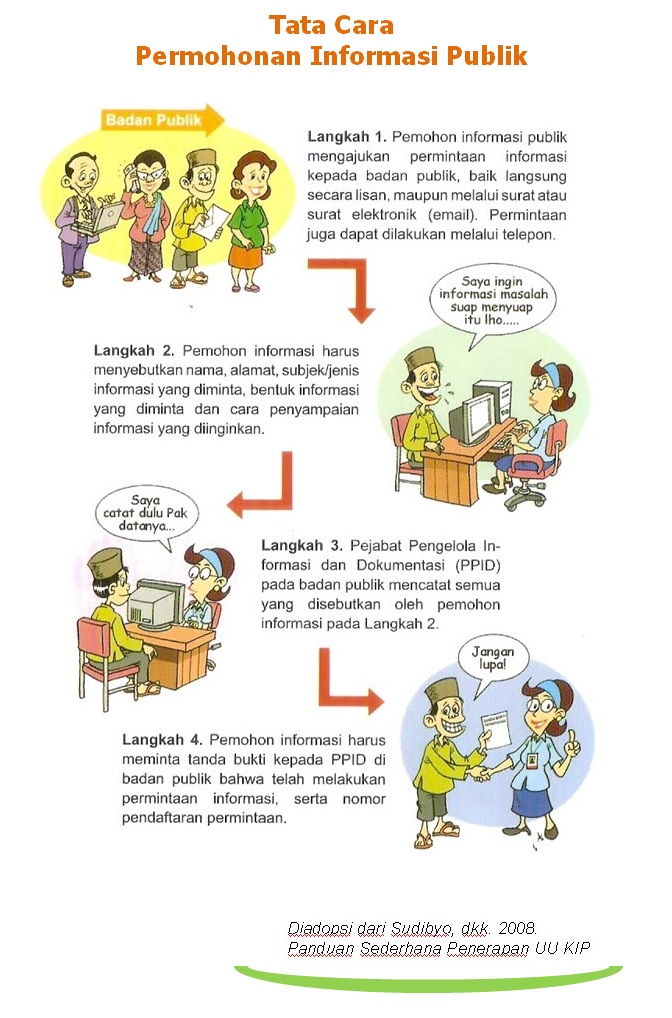
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**PEMERINTAH KOTA MAGELANG**

**DINAS PENDIDIKAN DAN KEBUDAYAAN**

Jln.Alibasah Sentot Prawirodirjo No. 6 🕿 (0293 ) 368529

e-mail : diknas\_kota\_magelang@yahoo.co.id

**FORMULIR PERMOHONAN INFORMASI**

No. Pendaftaran : .........................................

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Nama** | **:** | .......................................................................................................... |  |  |  |
| **Alamat** | **:** | .......................................................................................................... |  |  |  |
|  | **:** | .......................................................................................................... |  |  |  |
| **Pekerjaan** | **:** | .......................................................................................................... |  |  |  |
| **Nomor Telepon/E-Mail** | **:** | .......................................................................................................... |  |  |  |
| **Rincian Informasi yang dibutuhkan** | **:** | .......................................................................................................... |  |  |  |
| (tambahkan kertas bilaperlu) | **:** | .......................................................................................................... |  |  |  |
|  | **:** | .......................................................................................................... |  |  |  |
| **Tujuan Penggunaan Informasi** | **:** | .......................................................................................................... |  |  |  |
|  | **:** | .......................................................................................................... |  |  |  |
| **Cara Memperoleh Informasi** | : | 1. |  | Melihat/Membaca/Mendengarkan/Mencatat |  |
|  |  |
|  |  | 2. |  | Mendapatkan Salinan informasi(hardcopy/softcopy) |  |
|  |  |  |  |
| **Cara mendapatkan Salinan Informasi\*\*** | : | 1. |  | Mengambil Langsung |  |
|  |  |
|  |  |
|  |  | 2. |  | Kurir |  |
|  |  |  |  |
|  |  | 3. |  | Pos |  |
|  |  |  |  |
|  |  |  |  |
|  |  | 4. |  | Faksimili |  |
|  |  |  |  |
|  |  |  |  |
|  |  | 5. |  | E-mail |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |  |  |

Magelang, .............................

**Petugas Pelayanan Informasi** **Pemohon Informasi**

**(Penerima Permohonan)**

(.............................................) (...............................................)

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|  | **:** | .......................................................................................................... |  |  |  |
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| **Nomor Telepon/E-Mail** | **:** | .......................................................................................................... |  |  |  |
| **Rincian Informasi yang dibutuhkan** | **:** | .......................................................................................................... |  |  |  |
| (tambahkan kertas bila perlu) | **:** | .......................................................................................................... |  |  |  |
|  | **:** | .......................................................................................................... |  |  |  |
| **Tujuan Penggunaan Informasi** | **:** | .......................................................................................................... |  |  |  |
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**Petugas Pelayanan Informasi** **Pemohon Informasi**

**(Penerima Permohonan)**

(.............................................) (...............................................)