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| (nazwa, adres, NIP lub REGON jednostki kierującej na badanie1)) | | | | | | | | | | | | | |  | | (miejscowość, data) | | | | | | | | | |
|  | | | | | | | | | | |  | | |  | |  | | | | | | | | | |
|  | |  | | **SKIEROWANIE NA BADANIE PSYCHOLOGICZNE** | | | | | | | | | | | | | | |  | | |  | | | |
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| Działając na podstawie | | | | | |  | | | | | | | | | | | | | | | | | | | |
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| kieruję: | |  | |  | | |  |  | | |  | | |  | |  | | |  | | |  | | | |
| Pana/Panią | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | |  | | |  | (imię i nazwisko) | | | | | |  | |  | | |  | | |  | | | |
| numer PESEL (w przypadku osoby nieposiadającej numeru PESEL podać nazwę i numer | | | | | | | | | | | | | | | | | | | | | | | | | |
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| dokumentu potwierdzającego tożsamość): | | | | | | | | |  |  | |  |  | |  | |  |  | |  |  | |  |  | |
| zam. |  | | | | | | | | | | | | | | | | | | | | | | | | |
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| (miejscowość, ulica, nr domu, nr mieszkania) | | | | | | | | | | | | | | | | | | | | | | | | | |
| na badanie w celu wydania orzeczenia o braku lub istnieniu przeciwwskazań psychologicznych do | | | | | | | | | | | | | | | | | | | | | | | | | |
| pracy na stanowisku | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| Pracownik jest narażony na | | | | | | |  | | | | | | | | | | | | | | | | | | |
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|  | |  | |  | | |  |  | | |  | | | (czytelny podpis osoby kierującej na badanie) | | | | | | | | | | | |
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| 1) Dane te mogą być naniesione także w formie pieczątki, nadruku lub naklejki. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2) Wpisać podstawę prawną, przy braku podstawy skreślić. | | | | | | | | | | | | | | | | | | | | | | | | | |