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| القسم  Department |  | | التاريخ  Date | |  |
| اسم الموظف  Employee Name | مطابق لتعليمات النظافة الشخصية  Comply with personal cleaning directions | | | نوع المخالفة (إذا وجد)  Violation type (if exists) | |
| نعم  Yes | لا  No | |
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توقيع رئيس القسم  
Department Head Signature

توقيع قائد فريق الهاسب  
HACCP Team Leader Signature