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|  | **National Renal Registry** | *For office use:* |  |
| **Malaysian Society of Nephrology** | *Telephone:* | 603-22763686 603-22763687 |
| **Nephrology Trainee Registration Form (Borang 7)** | *e-mail* | nrr@msn.org.my  |

*To Nephrology Trainee,*

* *Welcome to be a member to the Nephrology Family.*
* *You shall be registered with NRR and provided with an access to eNRR;* [*https://www.msn.org.my/enrr*](https://www.msn.org.my/enrr) *.*
* *The NRR official document are prompted when you activate your account during the ”First Time Login”. Please read it and you shall agreed to observe before your access to eNRR.*
* *All registered Nephrology trainee will have access to eNRR, eMRRB & MyKAS*
* *Do officially inform* *nrr@msn.org.my* *whenever:*
	+ *Change in posted training centre to facilitate your access.*
	+ *you change your mobile number and/or e-mail*
	+ *Once you have successfully completed the training, do update the date Nephrology Training Complete officially*

# **1 Your affiliated centre information**

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| Your affiliated centre information: |
| **Centre Name:** |  |
| **Centre Address*:*** |  |
| Postcode: |  | City/Town: |  | State: |  |

**2 Your personal information**

|  |  |  |
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| **Nephrology trainee:** |  |  |
| ***Name:*** |  | *Mykad No:* |  |
| *Mobile phone:*  |  | *e-mail address:* |  |
| **Doctor qualification: (Degree/Membership/Fellowship)** |  |
|  Physician (MD)  |  Others, specify |   |
| *National Specialist Register No.:* |  |
| Date start nephrology training: *(dd/mm/yyyy)* |  *Date start:* |  |  |

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| --- |
| Remarks: |

***I here confirmed that the above is my trainee.***

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| Name of Supervisor:(Nephrologist) |  | Mobile No.: |  |
| Designation: |  | Date update: |  |

***Important!***

1. *For your Personal Data Protection (PDPA), please encript this document with “****Password****” before return to* nrr*@msn.org.my* *. Inform / Disclose the “****Password****” in another separate subsequent e-mail; Do not attach this document please.*
2. *Please notify whenever your new posting site to facilitate update of your centre.*
3. *Please notify once you are credentialed as a nephrologist for record update.*