คณะกรรมการประเมินบุคคล เพื่อเลื่อนขึ้นแต่งตั้งให้ดำรงตำแหน่งประเภทวิชาการ

ระดับชำนาญการ ชำนาญการพิเศษ โรงพยาบาลลำปาง สำนักงานสาธารณสุขังหกวัดลำปาง

ผู้เข้ารับการประเมิน ชื่อ.................................................................นามสกุล.................................................

วันที่ ..................................................................................................

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1. ขอให้ท่านแสดงวิสัยทัศน์ เมื่อท่านได้รับการคัดเลือกให้ดำรงตำแหน่งระดับชำนาญการพิเศษ ท่าน จะพัฒนางานอย่างไร จงอธิบาย

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