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| **الإدارة:** الإدارة العامة لشؤون الأسرة**الدائرة:** المرأة | **رمز النموذج:** | SS-7000-Temp04-v01 |
| **تابع لإجراء عمل معياري رقم:** | SS-7000-13-V-01 |
| **تابع لإجراء عمل معياري باسم:** | إجراءات تقديم الخدمة وخطة التدخل داخل مراكز حماية المرأة |

**نموذج خطة التدخل والمتابعة لمنتفعة من مركز حماية المرأة المعنَّفَة**

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| الاسم الرباعي:  | رقم الملف: *[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]*  |
| تاريخ بداية الخطة: *[ ] [ ]  [ ] [ ]  [ ] [ ] [ ] [ ]*  | تاريخ انتهاء الخطة التقديري: *[ ] [ ]  [ ] [ ]  [ ] [ ] [ ] [ ]*  |

| **التاريخ** | **عنصر التدخل** | **مستوى الأداء المطلوب** | **مستوى الأداء الفعلي** | **توقيع مرشدة حماية المرأة** | **توقيع رئيسة قسم الحماية والإرشاد** |
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| **خطة الإرشاد النفسي (المرشدة النفسية والاجتماعية)** |
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| **خطة الخدمات الصحية (الطبيبة المقيمة)** |
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| **خطة الدعم القانوني (المرشدة القانونية)** |
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| **خطة تقديم الخدمات التعليمية والتدريبية** |
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| **خطة تقديم الخدمات الرياضية والثقافية** |
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| **خطة تقديم خدمات الحضانة لأطفال المنتفعة في حال مرافقتهم لها** |
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| التسهيلات اللازم توفرها في بيئة الحماية: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **اسم مرشدة حماية المرأة** | **التوقيع** | **التاريخ** |
|  |  | [ ] [ ]  [ ] [ ]  [ ] [ ] [ ] [ ]  |

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| الخدمات القانونية الأساسية التي تحتاجها المنتفعة: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **اسم المرشدة القانونية** | **التوقيع** | **التاريخ** |
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| توصيات رئيس قسم الحماية والإرشاد: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **اسم رئيس قسم الحماية والإرشاد** | **التوقيع** | **التاريخ** |
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**جهات التدقيق على تنفيذ الخطة التدريبية**

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| **المسمى الوظيفي** | **الاسم الرباعي** | **التوقيع** | **التاريخ** |
| مرشدة حماية المرأة |  |  | [ ] [ ]  [ ] [ ]  [ ] [ ] [ ] [ ]  |
| المرشدة القانونية |  |  | [ ] [ ]  [ ] [ ]  [ ] [ ] [ ] [ ]  |
| الطبيبة المقيمة |  |  | [ ] [ ]  [ ] [ ]  [ ] [ ] [ ] [ ]  |
| رئيسة قسم الحماية والإرشاد |  |  | [ ] [ ]  [ ] [ ]  [ ] [ ] [ ] [ ]  |
| مديرة المركز |  |  | [ ] [ ]  [ ] [ ]  [ ] [ ] [ ] [ ]  |