様式４－２

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| （特別養護老人ホーム（例））平成　　年度　特別養護老人ホーム○○○○事業計画書１　所在地２　利用定員３　職員定数４　事業開始年月日（予定）５　事業運営基本計画６　利用者の処遇（１）生活指導（２）給　食（３）環境の整備（４）事故防止７　健康管理８　防災計画９　日　課１０　職員名簿

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| 職　名 | 氏　名 | 前　歴 | 資　格 | 年齢 | 本　俸 |
| 施設長 |  |  |  |  |  |
| 事務員 |  |  |  |  |  |
| 介護支援専門員 |  |  |  |  |  |
| 生活相談員 |  |  |  |  |  |
| 介護職員 |  |  |  |  |  |
| 　〃 |  |  |  |  |  |
| 医師 |  |  |  |  |  |
| 看護職員 |  |  |  |  |  |
| 機能訓練指導員 |  |  |  |  |  |
| 栄養士 |  |  |  |  |  |
| 調理員 |  |  |  |  |  |
| 　〃 |  |  |  |  |  |
| 介助員 |  |  |  |  |  |

１１　資金計画 |