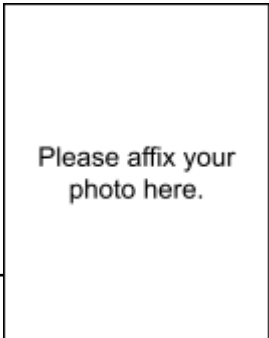


JOB APPLICATION FORM

IMPORTANT INSTRUCTIONS:-

1. Please read through the form carefully before attempting to complete the form.
2. The form should be completed in the handwriting of the applicant (in Block Capitals) sign by him / her and returned with one (1) recent photographs (passport size) and one (1) copy of Identity card.
3. Kindly be informed that any incorrect information provided in the application form will result in the application being rejected or, if not detected until after appointment, an **INSTANT DISMISSAL**.
4. Copies of relevant documents should be attached with the application form.
5. You are responsible to inform the mangement for any change of information in future.



POSITION APPLIED FOR :

A. PERSONAL PARTICULARS

Full Name : Gender : Male Female

Address :

Contact No. : (House) (Handphone)

I/C No. : (New) (Old)

Date of birth : Place of birth : Age :

Nationality : Race : Religion :

EPF No. : Socso No. : Income Tax No. :

Driving License : Yes No Category :

Own Transport : Yes No Type : Car Motorbike Others

B. HEALTH

- (a) Present state of health: Excellent / Good / Poor
- (b) Physical disabilities or handicap, if any (e.g. Sight; hearing; speech; lameness etc.)
-
-

(c) Serious illness or accidents suffered since birth with approx. dates:-

.....

.....

C. DECLARATIONS: ANSWER "YES" OR "NO" (If Yes, please give details)

- | | | | |
|--|------------------------------|-------|-----------------------------|
| (a) Have you ever been declared bankruptcy? | <input type="checkbox"/> YES | | <input type="checkbox"/> NO |
| (b) Have you ever been arrested or convicted on a criminal charge? | <input type="checkbox"/> YES | | <input type="checkbox"/> NO |
| (c) Have you ever been suspended or dismissed from any employment? | <input type="checkbox"/> YES | | <input type="checkbox"/> NO |
| (d) Have you any active interest in any business undertaking, including family business? | <input type="checkbox"/> YES | | <input type="checkbox"/> NO |

D. MARITAL STATUS

Marital Status : Single Married Divorced Widowed Others

If married, give details of SPOUSE:

Full Name :

I/C No. : (New) (Old) Age :

Date of marriage : Occupation :

Employer :

..... Tel No. :

Number of children : (Please provide the following details of your children of all ages)

Name	Gender	Date of birth

E. FAMILY BACKGROUND

Father's name : Occupation :

Mother's name : Occupation :

Number of brothers / sisters :

(Please provide the following details of your brothers & sisters who are 21 years of age and above)

Name	Relationship	Age	Occupation

Person to be notified in case of emergency (Name, Address & Telephone No.)

.....

F. EDUCATION & PROFESSIONAL QUALIFICATIONS (Give details of any qualifications / courses that you have attended / currently studying which are relevant to the post you are applying)

Name of School / College / University	Qualification :- PMR (LCE/SRP) / SPM (MCE) / STPM (HSC) / Certificate / Diploma / Degree / Professional Qualification Attained	Grade obtained	Completion Year

J. OTHER INFORMATION

Have you a friend / relative working in this Company? If Yes, please state the name, relationship and department / position held. YES NO

Have you applied to any job in this Company before? If Yes, please state the department, position and date you applied. YES NO

Expected Salary: **Date of commencement, if successful:**

K. REFERENCE (List two (2) personal referees who are not relatives)

Name	Address & Contact No.	Occupation	Years Known

Do you agree if we contact to them? YES NO

L. ADDITIONAL INFORMATION

Give any other information which will help us to consider your application.
 (Please state here other additional information which may be important in support of your application. Include any special talents, qualities or achievements not otherwise stated in this Application Form. Continue on separate sheet, if necessary.)

M. DECLARATION

I declare that the information given in this application is true and accurate. I understand that any misrepresentation of facts given herein will be sufficient cause for dismissal from the company's services if I have been employed. Enclosed are copies each of my education / professional qualification certificate / diploma / degree and/or appropriate recommendation letters / testimonials.

Signature : **Date** :

All Information given will be kept private and confidential.

