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| **EMPLOYMENT APPLICATION**  **Position Applied**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Please fill up this form correctly and accurately. All information will be kept confidential.) | |

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| Personal Particulars | | | | | | | | | | | | | | | | | | |
| Name (Mr/Miss/Mrs/Mdm) | | | | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | | | | |
| Tel No. | | H/P No. | | | | | | | | Email Address: | | | | | | | | |
| Date of Birth | | Birthplace | | | | | | | | Race | | | | | Sex | | | |
| NRIC No | | | | Religion | | | | | | Citizenship | | | | | | | | Age |
| Marital Status | Single | | | | Married | | | | Separated | | | | | Divorced | | | Widowed | |
| If married, states spouse’s name | | | | | | | | | | | | | And occupation | | | | | |
| No. of Children | | | | | | | | | | Age Range | | | | | | | | |
| Parents Currently Employed Yes No | | | | | | No. of Siblings | | | | | Age Range | | | | | | | |
| In case of emergency, notify | | | Name | | | | | | | | | | | | Relationship | | | |
| Address | | | | | | | | | | | | | | | Tel. No. | | | |
| Are you Currently Serving a Bond with your Employer? Yes No | | | | | | | | | | | | Salary Expected per Month $ | | | | | | |
| Other Positions for Which you May Be Qualified | | | | | | | Date Available | | | | | | | Relatives/Associates in Company | | | | |
| Previously employed by / applied to join Company  Yes No | | | | | | | | Date of Departure | | | | | | | | Position | | |

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| Education | | | | | | | | | | |
| Name of School | Address | | Level | | From | | To | Did you Graduate | | Details |
| Yes | No |
|  |  | | Primary | |  | |  |  |  |  |
|  |  | | Secondary | |  | |  |  |  |  |
|  |  | | Vocational | |  | |  |  |  |  |
|  |  | | Polytechnic | |  | |  |  |  |  |
|  |  | | Junior College | |  | |  |  |  |  |
|  |  | | University | |  | |  |  |  |  |
|  |  | | Other | |  | |  |  |  |  |
| Planning on Further Education Yes No | | If so Part Time Full Time | | | | Educational Institute | | | | |
| Schedule of Lessons | | | | | | | | | | |
| Other Training or Special Skills | | | | Hobbies | | | | | | |

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| National Service | | | | | | | | | | |
| FULL TIME | From | To | Type of Discharge | | Vocation | | Next In-Camp Training | | | Last Rank |
| Service Schools or Special Experience | | | | | | | | | | |
| PART TIME | Unit Attached | | | Duration of Liability | | Frequency of Duties | | | Last Rank | |
| EXEMPTED/DEFERRED/AWAITING | | | | Reason(s) | | | | Period/Date of Registration | | |

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| Employment History | | | | | | |
| Name of Employer | Address of Employer | Position | From | To | Salary | Reason for Leaving |
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| Languages |
| Languages Spoken |
| Languages Written |

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| Medical History |
| Any Physical Disability? No / Yes, Please Specify |
| Any Major Illness / Accidents in the Last Six Months? No / Yes, Please Specify |

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| References | | | | |
| Name | Address | Occupation | Contact No. | Years Known |
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| Declaration |
| I have / have never been convicted on a criminal charge.  I have/ have never taken and am presently not taking illegal drugs.  I hereby certify that the above information as provided by me is true, complete and accurate to the best of my knowledge. I further understand that any willful act on my part in withholding or falsifying information in this Employment Application is in itself sufficient ground for dismissal from the Company. |
| Signature of Applicant Date |