



APPLICATION FORM

Position applied: _____

Full Name: _____

Address: _____

Contact No. (Home): _____ Hand Phone: _____ E-mail: _____

I/C No. (New): _____ Sex: _____ Age: _____

E.P.F. No.: _____ Licence No.: _____ Class: _____

Marital Status: _____ Name of Spouse: _____

Education

#	University/ School	Year	Course Studied	Certificate Awarded
1				
2				
3				
4				

University/ School Activities

#	University/ School	Year	Society/ Club	Activities/ Achievements
1				
2				
3				

Language (*Proficiency: Best = 10 – Worst = 1)

#	Language	Spoken*	Written*
1	English		
2			
3			
4			

Skills (**Proficiency: Advanced, Intermediate or Beginner)

#	Proficiency**	Skill(s)	Years of Experience
1		Microsoft Office	
2			
3			

Employment History

#	Company Name	Position	Period of Employment	Salary	Reason for leaving
1					
2					
3					
4					

Personal Background

Outdoor activities: _____

Hobbies: _____

Do you smoke: Yes No

Do you suffer from any illness: Yes, please state: _____ No

Job Preferences

Research Administrative ICT Marketing Biostatistics

Willing to work long hours/weekends: Yes No

Willing to travel: Yes No

Willing to relocate: Yes No

Expected Salary: _____

Availability: _____

References

Name: _____

Relationship: _____

Contact No.: _____ Email: _____

I declare that all the information given is true and I understand that any false information given may render me liable if employed to dismissal.

(Signature of Applicant)

(Date)