

2FA Security

Event Management

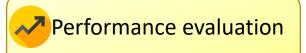
(§) IT



Employees info



Leave management



Training planning and reports



HR forms





Port Info

\$ Human Resources

(N Occupational H & S

Operations

Event Management

2FA Security

(ô) IT





Port Info

Human Resources

Occupational H & S

Operations

Event Management

2FA Security

<a>⟨ô⟩ IT **Employees information**





Documents

Qualification and skills

Personal

Contract

Edit

+123456789

Andrew

Technical assistant

Andrew@hotmail.com

m Delete

Teena Technical assistant teena@hotmail.com +123456789

Personal

Contract

Documents

Qualification and skills

Personal info

Nationality:

Address:

City:

State:

country:

Zip code:

Marital status:

Date of birth:

Spouse:

Home contact number:

NCP Contact Number:

NIB Number:



All fields should be dynamic It may have slight variations in different ports

+ Add employee

Port Info

\$ Human Resources

(N) Occupational H & S

Operations

Event Management

2FA Security

(Ĝ) IT

Employees information



Delete



Edit

Andrew
Technical assistant
Andrew@hotmail.com
+123456789

Personal

Contract

Documents

Qualification and skills

contract info

Date of Hire::

Job Title:

Department:



View Employment Contract

+ Add employee



All fields should be dynamic It may have slight variations in different ports







Teena
Technical assistant
teena@hotmail.com
+123456789

Personal

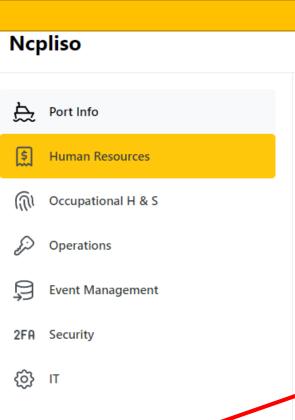
Contract

Documents

Qualification and skills



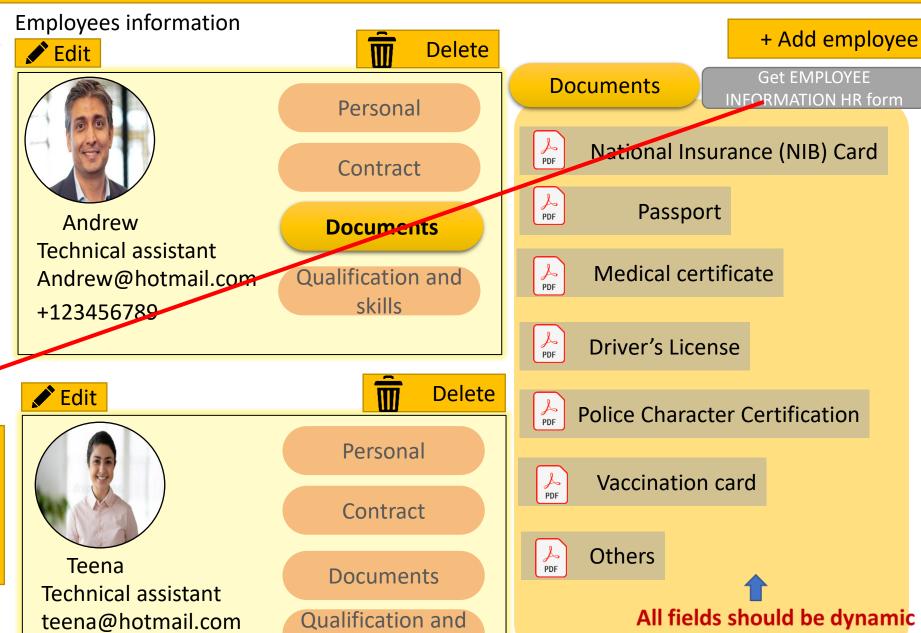
Logout



Admin / assigned authority can able to get the filled HR employee information form.
Which is submitted by employee in HR form module

+123456789





skills

It may have slight variations in

different ports

Port Info

\$ Human Resources

(N Occupational H & S

Operations

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2FA Security

(Ĝ) IT







All fields should be dynamic It may have slight variations in different ports Admin / assigned authority can able to get the filled HR employee information form



NCPL IMS HR DEPARTMENT FORMS EMPLOYEE INFORMATION

IMS-HR-003

January 1st 2023

Personal Information:					
Employee Na	me: Date of E	sirth <i>(ооммүү</i>):	tionality:		
Date of Hire:	Job Title	: De	partment:		
Contact Num	ber: Email:		B Number:		
Address:					
City:	State:		o Code:		
Home Phone:	Personal Ema	il:			
NCP Contact Number:					
Marital Statu	Spouse's Na	me:			
Number of De	ependents:				
Dependents:					
Беренаенты					
Jependents.		1	Date of Rinth		
	Name	Relationship	Date of Birth (mm/dd/yyyy)		
	Name	Relationship			
	Name	Relationship			
	Name	Relationship			
E		Relationship			
General inform	ntion:		(mm/dd/yyyy)		
General informa		conditions that may affect your job	(mm/dd/yyyy)		
General informa	rtion: from any allergies or physical /medical	conditions that may affect your job	(mm/dd/yyyy)		
General informa Do you suffer Should specia	rtion: from any allergies or physical /medical	conditions that may affect your job his condition? If so, please state:	(mm/dd/yyyy) performance? No		
General information of the second of the sec	ntion: from any allergies or physical /medical Il provisions be made to accommodate (conditions that may affect your job his condition? If so, please state: that may affect you job performanc	(mm/dd/yyyy) performance? No		



NCPL IMS HR DEPARTMENT FORMS EMPLOYEE INFORMATION

IMS-HR-003

January 1st 2023

Which languages, other than Englis	h do you speak fluently?	
Banking Information		
Name of bank:	Branch:	
Account number:		
IR Checklist:		
Employment Contract:	Passport Copy & Photo:	Required Certification:
National Insurance (NIB) Card:	Medical Certificate:	Driver's License (If needed):
Police Character Certification: emarks:	Vaccination card:	
Employee File Complete:		Date: