

12 Woodlands Square, Woods Square Tower 1, #11-78, Singapore 737715 | Tel: (65) 6513 2627 | www.dreamcation.com.sg

APPLICATION FOR EMPLOYMENT PASSPORT PHOTOGRAPH OF APPLICANT APPLICATION FOR EMPLOYMENT POSITION APPLIED FOR																
Delete wherever applic				data nee	eded for	administra	tive purpose o	nly								
Full Name in Block				Mdm	(As in Ni	RIC, Unde	rline Surname)) /	Aliase	s (if a	iny)					
Residential Address Contact Details																
Block / House No. : Floor				· / Unit No. :				Home Tel No.:								
Street:					Handphon	Handphone No.:										
Postal Code:							Email Add	Email Address:						1	1	1
				our of NRIC			# Race Chinese / N Indicate Re				Malay / Indian / Others					
S			Pink	□ві	lue	# Mar	ital Status				arried / Divorced / Widowed					
Nationality	untry of Birth				# Date of Birth Day Month Year				arks (for official use only)							
# PART II FAMILY Particulars of Parents Particulars of Spouse	s & Siblings	(For Sin	gle App arried Ap	licant))											
Name					Age	Relationship					Occupation					
Emergency Conta	act Details	8														
Contact Person				Rela	tionshi	o	Contact No.									
							Home Tel No.:									
							Handphone N	No.:								



PART III EDUCATIONAL DETAILS											
Name of School / College / Tertiary Institution			From To Highes		st Qualific	ation Obtained	Field /	Field / Discipline			
# PART IV LANGUAGE PROFICIENCY (Tick as appropriate)											
Languages / Dialects					Spoken	ı	Written				
33			Fluent		Fair	Poor	Fluent	Fair	Poor		
PART V EMPLOYMENT	DETAILS (in ch	ronolog	ical ord	er)							
No approach will be made					r consent						
Name of Organization			From To		Pos	ition Held	Basic Salary	Reason(s) For Leaving			
							3 3 3 3 3		.		
# PART VI DETAILS OF	MEMBERSHIP (OF ANY	CLUBS	, ASS	OCIATION	OR SOC	IETY				
Name of Organization From To						0	Position Held				
PART VII REFEREES (No	on Palativas - E	a Ev-Su	narvisar	Toar	n Leader N	(Janager)					
Please give details of two	referees whom	we may	approac	h for r	eferences.	nariager)					
Name						Pos	ition Held		Contact No / Email Address		
								Add			
Minimum Expectation Sala	arv	Notice F	Period R	equire	-d		Earliest Start [Date			
	A TOUGH	SHOU IN	Squire	. 							



Но	w di	d you come to know about this position?	
	a)	Website Advertisement, please state date of advertisement :	
	b)	Newspaper Advertisement, please state date of advertisement:	
	c)	Friends/ Relatives (if working with Dreamcation Cruises & Tours, please state):	
	d)	Others, please state:	1
# P 1.	Hav phy	TVIII OTHER INFORMATION (circle as appropriate) ve you ever suffered, or suffering from any medical condition, illness, disease, mental illness ysical impairment? yes, please specify:	ss or * Yes / No
2.		e you serving any bond with your present employer?	* Yes / No
	If y	es, please specify:	
3.	Ha	ve you ever been dismissed or discharge from the services of any company?	
	If y	es, please specify:	* Yes / No
4.		you have a criminal record? (By this, we refer only to a criminal record of a conviction under the gistration of Criminals Act	* Vaa / Na
	If y	es, please specify:	* Yes / No
l de hav	eclare	X DECLARATION e that the particulars in this application and the sheets attached hereto, are true to the best of willfully suppressed any material fact. I accept that providing deliberately false information al.	
	Sic	gnature of Applicant	Date