

Company Logo Here

**For Office Use Only**

1<sup>st</sup> Day of Work: \_\_\_\_\_

Designation: \_\_\_\_\_

Department: \_\_\_\_\_

Candidate's /  
Employee's  
Photograph Here

POSITION APPLIED FOR :

## EMPLOYEE APPLICATION / PERSONAL DATA FORM

### A. PERSONAL INFORMATION

Name (as in NRIC) : \_\_\_\_\_

Other Name : \_\_\_\_\_

NRIC No. \_\_\_\_\_ (New) \_\_\_\_\_ (Old)

Passport No. : \_\_\_\_\_ Issuing Country : \_\_\_\_\_

Address (Current) : \_\_\_\_\_

Address (Permanent) : \_\_\_\_\_

Religion : ☐ Muslim ☐ Buddhism ☐ Christianity ☐ Hinduism ☐ Others

Nationality : \_\_\_\_\_ Gender : Male ☐ Female ☐

Date Of Birth : \_\_\_\_\_ Age \_\_\_\_\_

Telephone No . : \_\_\_\_\_ (Mobile) \_\_\_\_\_ (Home)

Email address \_\_\_\_\_

Health Condition : ☐ Excellent ☐ Good ☐ Fair ☐ Poor

Marital status & others : ☐ Single ☐ Married ☐ Divorced ☐ Widowed

Do you have children? ☐ Yes ☐ No No. of Children : \_\_\_\_\_  
(tick only if applicable)

Are you currently pregnant?  
(tick only if applicable) ☐ Yes ☐ No ☐ N/A

**Particulars of Children (if applicable):**

No.	Full Name	Date of Birth	Age

**B. OTHER INFORMATION (SECTION TO BE COMPLETED IF APPLICABLE)**

Name of Spouse : \_\_\_\_\_

NRIC No : \_\_\_\_\_ (New) \_\_\_\_\_ (Old)

Date of Birth : \_\_\_\_\_

Occupation : \_\_\_\_\_

Address : \_\_\_\_\_  
\_\_\_\_\_

Telephone No. : \_\_\_\_\_ (Mobile) \_\_\_\_\_ (Home)

**C. NEXT OF KIN**

In case of emergency, the Firm should contact the following person:

Name : \_\_\_\_\_

NRIC No. : \_\_\_\_\_ (New) \_\_\_\_\_ (Old)

Relationship ☐ Husband/Wife ☐ Son/Daughter ☐ Others  
☐ Father/M other ☐ Brother/Sister

Telephone No. : \_\_\_\_\_ (Mobile) \_\_\_\_\_ (Home)

Address : \_\_\_\_\_  
\_\_\_\_\_

**D. PERSONAL PAYROLL INFORMATION**

Bank : \_\_\_\_\_ A/C No : \_\_\_\_\_ Branch : \_\_\_\_\_

EPF No. : \_\_\_\_\_

SOCSSO No. : \_\_\_\_\_

Income Tax No : \_\_\_\_\_

Employee Taxpayer Status : Single

☐

Married and spouse is not working

☐

Married and spouse is working

☐

(a) Claim Children Deduction

☐

(b) Children deduction claim under spouse

☐

## E. EDUCATION

LEVEL	NAME OF SCHOOL / INSTITUTION	FROM	TO	HIGHEST QUALIFICATION ATTAINED	RESULTS
Primary					
Secondary					
College / Pre - U					
University					
Business Trade School					
Professional					

## OTHER SPECIALISED TRAINING

TYPE OF COURSE	INSTITUTION	QUALIFICATION	YEAR

## OTHER SKILL(S)

Language (s)

EXCELLENT

GOOD

FAIR

POOR

Spoken : \_\_\_\_\_

☐☐☐☐

\_\_\_\_\_

☐☐☐☐

\_\_\_\_\_

☐☐☐☐

\_\_\_\_\_

☐☐☐☐

Written : \_\_\_\_\_

☐☐☐☐

\_\_\_\_\_

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\_\_\_\_\_

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\_\_\_\_\_

☐☐☐☐

Typing : ☐ Yes ☐ No (WPM: ) Shorthand : ☐ Yes ☐ No

Software : MS Word ☐ Yes ☐ No

Knowledge MS Excel ☐ Yes ☐ No

MS Powerpoint ☐ Yes ☐ No

MS Outlook ☐ Yes ☐ No

Others :

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#### F. PREVIOUS EMPLOYMENT

Are you currently employed?: ☐ Yes ☐ No

##### PLEASE LIST BEGINNING FROM MOST RECENT JOB HELD

(a) Company Name : \_\_\_\_\_

Nature of Business : \_\_\_\_\_

Location : \_\_\_\_\_

Position : \_\_\_\_\_

Employment Dates : From: \_\_\_\_\_ To: \_\_\_\_\_

Salary : First: \_\_\_\_\_ Last: \_\_\_\_\_

Job Notes, task performed, skills used or learned, and reason for leaving:

\_\_\_\_\_  
\_\_\_\_\_

(b) Company Name : \_\_\_\_\_

Nature of Business : \_\_\_\_\_

Location : \_\_\_\_\_

Position : \_\_\_\_\_

Employment Dates : From: \_\_\_\_\_ To: \_\_\_\_\_

Salary : First: \_\_\_\_\_ Last: \_\_\_\_\_

Job Notes, task performed, skills used or learned, and reason for leaving:

\_\_\_\_\_  
\_\_\_\_\_

(c) Company Name : \_\_\_\_\_  
Nature of Business : \_\_\_\_\_  
Location : \_\_\_\_\_  
Position : \_\_\_\_\_  
Employment Dates : From: \_\_\_\_\_ To: \_\_\_\_\_  
Salary : First: \_\_\_\_\_ Last : \_\_\_\_\_

Job Notes, task performed, skills used or learned, and reason for leaving:

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May we contact your present Employer? ☐ Yes ☐ No ☐ N/A

#### G. GENERAL INFORMATION

1. How did you learn about our Company? ☐ Newspaper advertisement  
☐ Friends/Relatives  
☐ Websites  
☐ Career Fair  
☐ Others
2. Have you previously applied to us for employment? : \_\_\_\_\_
3. Available Start Date : \_\_\_\_\_
4. Desired Pay Range : \_\_\_\_\_
5. Do you have any relative/friend employed by us? If so, please state name and relationship (for relative):  
\_\_\_\_\_
6. Have you ever been convicted for any criminal offence? ☐ Yes ☐ No  
If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.
8. Do you have a driver's license? ☐ Yes ☐ No
9. What is your means of transportation to work? \_\_\_\_\_
10. Have you had any accidents during the past 3 years? ☐ Yes ☐ No

## H. REFERENCES

(Please list two references other than relatives)

1. Name : \_\_\_\_\_  
Title : \_\_\_\_\_  
Company : \_\_\_\_\_  
Address : \_\_\_\_\_  
Contact No : \_\_\_\_\_(Home) \_\_\_\_\_(Office) \_\_\_\_\_(Mobile)
  
2. Name : \_\_\_\_\_  
Title : \_\_\_\_\_  
Company : \_\_\_\_\_  
Address : \_\_\_\_\_  
Contact No : \_\_\_\_\_(Home) \_\_\_\_\_(Office) \_\_\_\_\_(Mobile)

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### DECLARATION

I hereby certify that all information contained in this application is true, correct and complete to the best of my knowledge. I further declare that all the information may be grounds for not hiring me and any misrepresentation or omission of facts is cause for dismissal without notification. By signing this form, I consent to the collection and processing of my personal data by [ **Company Name** ] for the purpose of considering my suitability for employment and I authorize the verification of any or all information listed above.

I also confirm I have received [ **Company Name** ]'s Privacy Policy.

Signature : \_\_\_\_\_ NRIC No.: \_\_\_\_\_ Date: \_\_\_\_\_

Note: The personal data provided in this form will be destroyed in the event the applicant is not offered a position or rejects the offer for employment.

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