



# MTD GROUP

## PERSONAL PARTICULAR FORM

Please exercise care in completing this form by providing accurate information. This form is in compliance with requirements from various statutory institutions. Should there be a change in any of these details in future, please fill in a new form and submit it to the Group Human Capital Division immediately.

### PERSONAL DETAILS

Butir- Butir Peribadi

Name of Employee : \_\_\_\_\_  
Nama Pekerja

Employee No. : \_\_\_\_\_ Date of Employment : \_\_\_\_\_  
No. Pekerja Tarikh mula kerja

Company : \_\_\_\_\_ Location: \_\_\_\_\_  
Syarikat Lokasi

Department : \_\_\_\_\_ Position: \_\_\_\_\_  
Jabatan Jawatan

NRIC No. (Old/ New) : \_\_\_\_\_ / \_\_\_\_\_  
No. K/P (lama/baru)

Date of Birth : \_\_\_\_\_ Place of Birth : \_\_\_\_\_  
Tarikh Lahir Tempat Lahir

Sex : \_\_\_\_\_ Religion : \_\_\_\_\_  
Jantina Agama

Nationality : \_\_\_\_\_ Race : \_\_\_\_\_  
Warganegara Bangsa

Marital Status : \_\_\_\_\_  
Taraf Perkahwinan

Residential Address : \_\_\_\_\_  
Alamat Kediaman

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

Postal Address : \_\_\_\_\_  
 Alamat Surat-menyurat \_\_\_\_\_

Phone No. (Home) : \_\_\_\_\_ Mobile Phone : \_\_\_\_\_  
 No. Tel. Rumah No. Tel. Bimbit

Name of Husband/wife/s: \_\_\_\_\_ Date of Marriage: \_\_\_\_\_  
 Nama suami/isteri \_\_\_\_\_ Tarikh Perkahwinan

Occupation : \_\_\_\_\_ Phone No : \_\_\_\_\_  
 Pekerjaan No. Tel

Name of Children* Nama Anak-Anak	Sex Jantina	Date of Birth Tarikh Lahir	Age Umur
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Relatives/husband/wife Employed by MTD Group of Companies  
 Saudara-mara/suami/isteri yang bekerja di Syarikat Kumpulan MTD Group

Name Nama	Relationship Hubungan	Company/Department Syarikat/Jabatan	Location Lokasi
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

\* please attach with copy of birth certificate/my kid. Ignore if the document has been submitted to GHCD  
 sila lampirkan salinan surat beranak/my kid. Abaikan jika salinan telah diberikan kepada GHCD

Income Tax No.: \_\_\_\_\_ EPF No.: \_\_\_\_\_

No. Fail Cukai Pendapatan \_\_\_\_\_ No. Ahli KWSP \_\_\_\_\_

SOCSO No.: \_\_\_\_\_ Do you Own Car: Yes/No  
No. Ahli PERKESO \_\_\_\_\_ Anda Memiliki KeretaDo You Possess A Driving Licence : Yes / No \_\_\_\_\_ Driving Licence No : \_\_\_\_\_  
Anda Memiliki Lesen Memandu \_\_\_\_\_ No Lesen Memandu \_\_\_\_\_**HIGHEST ACADEMIC QUALIFICATION/S \*****Kelayakan Akademik yang Tertinggi**

Type of Qualification Kelayakan /Peperiksaan	Grade Grad	Year Tahun	School Sekolah
PMR/SRP/LCE*	_____	_____	_____
SPM/MCE/SPVM*	_____	_____	_____
STPM/HSC*	_____	_____	_____
Diploma/Degree/Master/Phd* in _____			Year: _____ Tahun
College/University Kolej/Universiti	: _____		

I certify that the above particulars given by me are correct. I agree that should any particulars given subsequent found false the company may dismiss me without any liability whatsoever.

Saya mengesahkan segala maklumat yang diberikan adalah benar. Sekiranya terdapat keterangan palsu, pihak syarikat boleh memberhentikan saya tanpa apa-apa tanggungan.

Signature of Employee: \_\_\_\_\_  
Tandatangan pekerjaDate : \_\_\_\_\_  
Tarikh

\* Delete whichever is not applicable. Please attach the copy of cetificate/diploma/degree. Ignore if the copy has been submitted to GHCD

\* Potong untuk mana-mana yang tidak berkenaan. Lampirkan salinan sijil/diploma/ijazah. Abaikan jika salinan telah dihantar kepada GHCD