

HSBC Electronic Data Processing India Pvt. Limited

Job Application Form

* Please mark "N/A" wherever not applicable in this application form

Recent Passport Size
Photograph in Color

Position Applied for	Job Reference
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For Human Resources Department Use Only			
Candidate No.	Result Code	Staff ID (If application is successful.)	JO Schedule

Personal Particulars

Full Name (First, Middle, Last) First Middle Last	Former Name / Maiden Name	Other Names	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Blood Group
Marital Status	Place of Birth (City/State/Country)	Date of Birth (dd/mm/yy)		
* National ID Number	* Residency Number	* Social Security Registration Number		
* PAN Number (For India staff)	* PF Number (For India staff)	* Other Identification numbers		

Address & Contact details

Current Address	Period of stay From (dd/mm/yy) To (dd/mm/yy)	Address in Chinese (For China Candidates) Post Code
Post Code Prominent Landmark:		
Landline Number (Mandatory)	Cell Phone Number	Email Address
Permanent Address	Period of stay From (dd/mm/yy) To (dd/mm/yy)	Address in Chinese (For China Candidates) Post Code
Post Code Prominent Landmark:		
Landline Number (Mandatory)	Cell Phone Number	Email Address

Emergency Contact Person

Full Name	Name in Chinese (For China Candidates)	Relationship
Landline Number (Mandatory)	Cell Phone Number	Email Address

Passport Information (Please fill the fields below if you possess a passport, otherwise please mark as N/A)

Passport number	Issue Date	Expiry Date
Issued at (Name City/Country)	Issuing Authority	

Family Details

*Spouse				
Full Name		Date of Marriage		
Address (if different from Current Address)			Landline Number (Mandatory)	
			Cell Phone Number	
If employed, company of employment			Position Held	
*Children				
Full Name		Gender		Date of Birth
* This information will be used for insurance purposes				
Parents				
Name		Date of Birth	Address	Landline Number (Mandatory)
Father's Name				
Mother's Name				
Please provide details of any relative working in this company / HSBC group.				

Education Qualifications

Name and Complete Address of School/College/University	Enrollment / Roll / SSN Number	Date (mm/yy) From ~ To	Main Subject / Specialization	Grade
Highest Education Level				
Last two levels				

Training

Name of Institution	Date (mm/yy)		Name of the Course / Certificate Obtained	Main Subject / Specialization
	From	To		

Language Proficiency (Please tick the appropriate : H = High, M = Moderate, L = Low)

Languages Known	Spoken			Read			Written		
	H	M	L	H	M	L	H	M	L
(Mother Tongue)									

Employment History (Current Employer)

Name of Employer (Current)		Address of Current Employer	
Telephone Number	Employee Code/Number	Department	Designation
Employment Period From To	Line Manager's Name	Line Manager's Contact Number	Line Manager's Email Address
Reason for Leaving			
First Salary Drawn	Was this position		Agency Details (Temporary or Contractual)
Last Salary Drawn	<input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contractual		

Employment History (Last 2 Employers)

Name of Employer (1)		Address of Current Employer	
Telephone Number	Employee Code/Number	Department	Designation
Employment Period From To	Line Manager's Name	Line Manager's Contact Number	Line Manager's Email Address
Reason for Leaving			
First Salary Drawn	Was this position		Agency Details (Temporary or Contractual)
Last Salary Drawn	<input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contractual		

Employment History (Last 2 Employers)

Name of Employer (2)		Address of Current Employer	
Telephone Number	Employee Code/Number	Department	Designation
Employment Period From To	Line Manager's Name	Line Manager's Contact Number	Line Manager's Email Address
Reason for Leaving			
First Salary Drawn	Was this position		Agency Details (Temporary or Contractual)
Last Salary Drawn	<input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contractual		
Have you ever been employed by any HSBC company or subsidiary? <input type="checkbox"/> No <input type="checkbox"/> Yes Please specify _____			

References (From two persons not related to you- Please refer Page 5 for referral guidelines)- For New Joinees Only

Full Name	Designation / Profession	Landline Number (Mandatory)	Cell Phone Number	Email Address