

Doc No : F 119 Rev No : 01 Date : 17.10.16

Employee Name			
Employee Number			
Designation			
Division			Please attach your recent photograph here
Local Contact No			nore
Recruited Through			
Date Of Birth			
Date Of Landing (Sponsored Staff)			
Date Of Joining			
Passport Number			
Passport Validity			
Sponsored / Local Staff			
Resident Permit Number (Local Staff Only)		Validity	
Present Sponsor (Local Staff Only)			
Location Of Stay			
Telephone (Country Of origin)			
Email ID			
Father's Name			
Father's Occupation			
Permanent Residential Address			
In case of Emergency, Contact			
Nationality			
Blood Group:	Marital Status :		
Spouse Name		Occupation	
No of Children :			
Name	Age	Occupation	



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Have you suffered from any major ill	ness? YES /	NO If Yes, p	lease give de	etails :			
Have you applied for an employment	t with AL-BA	LAGH OIL &	GAS earlier?	YES/NO if y	/es, please g	ive details :	
Are you related to any past / present	employee /	director of th	is Company?	YES/NO:			
Languages Known (underline Mother Tongue)		READ		WRITE		SPEAK	
EDUCATIONAL QUALIFICATION							
Qualification	Institution Name & Place		Year & Month of passing	Degree /Diploma Receive d	Specialization Per ge		Percenta ge
WORK EXPERIENCE							
Total Work Experience in Years:				GCC Experience:			
Name & Address of Last Employer							
Date of Joining			Date Of Leaving				
Designation			Take Home Salary				
Name & Address of Last Employer							



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Date of Joining		Date Of Leaving		
Designation		Take Home Salary		
3. Name & Address of Last Employer				
Date of Joining		Date Of Leaving		
Designation		Take Home Salary		
4. Name & Address of Last Employer				
Date of Joining		Date Of Leaving		
Designation		Take Home Salary		
VISA				
Visa Type		Visa No.		Valid Up to
1. References : (Two references other than relatives)				
A. Name Address, Occupation & Phone Number :			ddress, Occ	cupation & Phone Number :
Do you have any objections to our securing report from your present and previous employers: (if required)				
Declaration				
I declare that the information and facts stated herein above are true and correct to the best of my knowledge and belief.				
I also understand that any misrepresentation of facts in this application is sufficient for dismissal, if ever found.				
Place				
Date: Signature:				
FOR OFFICE USE ONLY				
JOB NO./DIVISION		DATE OF JOIN	ING	



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Сору То:	
Division Head	GENERAL MANAGER

Following original certificates verified and returned: