**HONG KONG NEW HIRE/APPLICATION FORM**

Resources Global Professional is an equal opportunity employer. The information you provide will be kept confidential.

#### Employee Information

|  |  |  |  |
| --- | --- | --- | --- |
| Sex  M | Birth Date *(mm/dd/yy)*  12/11/1980 | First Day of Employment *(mm/dd/yy)*  04/12/2016 | Nationality  CHINESE |

**Personal Data**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Last Name, First Name, Middle Initial  Leung, Shiu Hong Tommy | | Chinese Name (if applicable)  梁紹康 | | Hong Kong ID  Z061906 ( 0 ) |
| Address  Rm 706, Block B, Healthy Garden, North Point | | | | |
| Home Phone | Mobile Phone  94247782 | | Email Address  cs\_lsh@hotmail.com | |

**Personal and Identification Data**

|  |  |  |
| --- | --- | --- |
| Marital Status[] SingleX Married 🞎 Divorced | | |
| Spouse Name: | ID/Passport No | |
| If Foreign Passports Held - Country: Number:  Do you require Hong Kong Work Visa? 🞎 Yes, attach copy of visa if any  🞎 No | | Visa Expires *(mm/dd/yy)* |

#### General Information

|  |
| --- |
| Have you ever been 🞎 Yes Details:  convicted of a crime? X No |
| Have you ever worked in 🞎 Yes Office Name(s): Date(s):  any of our offices? X No |
| Are you related to any of 🞎 Yes Name(s): Relationship: Company Position:  our clients’ employees? X No |

**Emergency Contact Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Key ID  001 | Last Name, First Name | | Relationship |
| Phone Number | | Mobile Phone Number | |
| Address  NO.282, KWAN TEI NORTH TSUEN, FANLING | | | |
| Key ID  002 | Last Name, First Name | | Relationship |
| Phone Number | |  | |
| Address | | | |

**Employee Emergency Information**

|  |
| --- |
| Please indicate if you have any medical condition or illness which might require emergency attention:  N/A |

**Educational Data**

|  |  |
| --- | --- |
| Date | School / Universities /Awards |
|  |  |

**Professional Qualification**

|  |  |
| --- | --- |
| Date | Designation |
|  |  |

**Language**

|  |  |  |
| --- | --- | --- |
| Language Skills | Spoken | Written |
|  |  |  |

**Prior Employment**

Account for all of your time chronologically for previous years, beginning with the present date. Ascertain correct dates and salaries from former employers if necessary. Please be sure to include Full Details in the address**.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From To | Present/Prior Employer Name & Address | | | | |
| Nature of Business | Last Title | | Functional Responsibility | | |
| Supervisor’s Name and Title | | Starting Salary / bonus | | Last Salary / bonus | Benefits |
| Reason for Leaving | | | | | |
|  | | | | | |
| From To | Present/Prior Employer Name & Address | | | | |
| Nature of Business | Last Title | | Functional Responsibility | | |
| Supervisor’s Name and Title | | Starting Salary / bonus | | Last Salary / bonus | Benefits |
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| --- | --- | --- | --- | --- | --- |
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| Nature of Business | Last Title | | Functional Responsibility | | |
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|  | | | | | |
| From To | Present/Prior Employer Name & Address | | | | |
| Nature of Business | Last Title | | Functional Responsibility | | |
| Supervisor’s Name and Title | | Starting Salary / bonus | | Last Salary / bonus | Benefits |
| Reason for Leaving | | | | | |

**Former Employer References**

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Please list 3 employer references that are not related to you who can verify employment.

|  |  |  |
| --- | --- | --- |
| Name / relationship  1. | Address | Phone Number |
| 2. |  |  |
| 3. |  |  |