



Symphonic/HRD/2022/015

## JOB APPLICATION FORM

Position Applied:

### PERSONAL DETAILS

First Name:	
Email:	
Home Address:	Correspondence Address:
Contact No (house):	Handphone No:
Date of Birth:	Age:
Marital Status:	Nationality:
Religion:	Race:
IC No:	Bank Account No:
EPF No:	LHDN Income Tax No:



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#### FAMILY DETAILS

<i>Relations</i>	<i>Name</i>	<i>Age</i>	<i>Tel No</i>	<i>Present/Previous Occupation</i>
Spouse				
Father				
Mother				
Children				

#### EDUCATION

<i>Name of School</i>	<i>Date of Commencing</i>	<i>Date of Graduation</i>	<i>Highest Academic Achieved</i>

#### OTHER ACADEMIC OR PROFESSIONAL QUALIFICATIONS

(Including training courses attended)

<i>Particular</i>	<i>Date</i>	
	<i>From</i>	<i>To</i>

**PROFESSIONAL SKILLS / KNOWLEDGE** (Courses, professional or occupation training)[illegible]

## LANGUAGE PROFICIENCY

<i><b>Language</b></i>	<i><b>Fair/Good/Excellent</b></i> <i><b>Oral</b></i>	<i><b>Fair/Good/Excellent</b></i> <i><b>Written</b></i>
English		
Malay		
Mandarin		

## EMPLOYMENT HISTORY

*Please give details here of full-time jobs. Start with your present or most recent position.*

[illegible]

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**REFERENCE DETAILS** *(Please provide at least two)*

<i>Name</i>	<i>Job Title &amp; Employer</i>	<i>Tel No &amp; Email Address</i>	<i>Relationship</i>

## EMERGENCY CONTACT

<i>Name</i>	<i>Tel No</i>	<i>Relationship</i>

## LEISURE ACTIVITIES/HOBBIES

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## OTHER INFORMATION

What makes you apply for this job?



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### DECLARATION

1. Do you have any relatives or friends currently/previously working us? **If yes, please state the name and position.**  
\_\_\_\_\_
2. Have you ever been dismissed from any employment due to misconduct? **Yes/No**
3. Have you had any legal convictions/offences/police record in the past? **Yes/No**
4. Have you ever been declared bankrupt or any order made against you under the bankruptcy ordinance? **Yes/No**
5. Have you ever suffered or suffering from any serious illnesses eg diabetes/hypertension/migraine/hepatitis? **If yes, please list down.**  
\_\_\_\_\_
6. If you are female, are you currently expecting/pregnant? **Yes/No**  
**No of months:**
7. In your last employed organization, how many days of sick leave did you take within a year? \_\_\_\_\_ **days**
8. If you are successful for this position, when are you able to start?  
\_\_\_\_\_
9. If you are successful appointed, what is your expected salary?  
\_\_\_\_\_

**I hereby confirm that the information stated above is true and accurate. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired.**

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

**Date:**