



EMPLOYMENT APPLICATION FORM

Please complete the application form in BLOCK LETTERS and enclose a passport size photograph. Copies of Academic Certificates should be attached. All information provided herein will be treated as CONFIDENTIAL.

Position applied : _____

PERSONAL INFORMATION

Name (as per IC) : _____

Permanent Address : _____

Correspondence Address : _____

Telephone No : House _____

Mobile _____

Others _____

NRIC : (Old) _____ (New) _____

Nationality : _____ Gender : _____

Date of Birth : _____ Age : _____

Place of Birth : _____

Race : _____ Religion : _____

Marital Status : SINGLE / MARRIED / DIVORCED / WIDOW / WIDOWER

Name of Spouse : _____

Occupation of Spouse : _____

Children Name	Gender	Age	Date of Birth	School/Occupation

FAMILY DETAILS

Father's Name : _____
Occupation : _____
Mother's Name : _____
Occupation : _____

Name of Siblings	Gender	Age	Occupation	Employer

ACADEMIC DETAILS

Qualification (Highest to Lowest)

Qualification	Institution	Grade / CGPA	Year

HEALTH DETAILS

Weight : _____ kg
 Height : _____ cm

Have you undergone any surgery or major treatment in the last 6 months?

Yes

No

If yes, please provide details of the treatment/surgery/illness.

Do you have any disabilities, allergy, etc? Please give details.

Please disclosed if you have ever been diagnosed for any of the following ?

Tick (✓)

	YES	NO
a. Heart Ailment		
b. Epilepsy		
c. Mental Disorder		
d. Respiratory Disorder		
e. Tuberculosis		
f. Cancer		
g. Hepatitis		
h. Renal Disorder		
i. Blood Disorder		
j. Allergy		
k. HIV (Positive)		
l. Diabetes		
m. Thyroid		
n. Migraine		
o. Others (Specify)		

If YES, please provide details.

EMPLOYMENT RECORD

Current Employment

Company : _____
 Date Joined : _____ Position : _____
 Nature of Business : _____
 Employment Status : PERMANENT / CONTRACT / PART-TIME
 Current Salary : _____ Allowance : _____
 Other Benefits : _____

Previous Employment

Company	Position	From	To	Salary	Reason for Leaving

Expected Salary : _____
 Notice Period Required : _____

SKILLS

Language Proficiency

Bahasa Malaysia
 English
 Others _____

Spoken

FAIR / GOOD / EXCELLENT
 FAIR / GOOD / EXCELLENT
 FAIR / GOOD / EXCELLENT
 FAIR / GOOD / EXCELLENT
 FAIR / GOOD / EXCELLENT

Written

FAIR / GOOD / EXCELLENT
 FAIR / GOOD / EXCELLENT
 FAIR / GOOD / EXCELLENT
 FAIR / GOOD / EXCELLENT
 FAIR / GOOD / EXCELLENT

Computer skills

Program	Specifications (details - if any)
MS Office	
MS Outlook / Access	
Others (please specify)	

ADDITIONAL INFORMATION

Do you have a friend or relative working in UM Specialist Centre (UMSC)?

Yes No

If yes, state name, relationship _____

Have you ever been charged and/or convicted in any criminal court of law?

Yes No

If yes, please provide details _____

Have you ever been sued and/or convicted for bankruptcy?

Yes No

If yes, please provide details _____

State the name of two (2) contact persons in case of emergency

Name	Relationship	Telephone No.	Address

REFERENCE

Please provide names and details of two persons who can provide personal reference on you.

Name	Add/Tel. No.	Occupation	Duration known

I declare that the information given in this application form is true and correct to the best of my knowledge.

I understand that any inaccurate facts given herein will be sufficient cause for UMSC to summarily terminate my appointment after engagement.

Signature : _____
Name : _____
Date : _____

FOR OFFICE USE

Interviewed by :-

1. _____
2. _____

Comments :-

Position Offered _____ Commencement Date _____

Signature _____ Date: _____