



8TH FLOOR, MENARA ZECON
NO. 92, LOT 393, SECTION 5, KTLD
JALAN SATOK, 93400 KUCHING, SARAWAK
TEL: 6-082-275555, FAX: 6-082-275500
E-mail: headoffice@myzecon.com

Form : FM-CRP-06
Rev : 02
Page : 1 of 5

JOB APPLICATION FORM			CONFIDENTIAL								
Name	<div style="border: 1px solid black; width: 150px; height: 120px; margin: 0 auto;"> <p style="text-align: center; margin: 0;">Recent Photograph</p> </div>										
Position Applied For											
REFEREES List two referees whom we may approach for testimonials											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Name</th> <th style="width: 40%;">Address</th> <th style="width: 30%;">Occupation</th> </tr> </thead> <tbody> <tr> <td style="height: 30px;"> </td> <td> </td> <td> </td> </tr> <tr> <td style="height: 30px;"> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Name	Address	Occupation								
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<p>I declare that I <u> </u> have <u> </u> been convicted of a criminal offence. <u> </u> have not</p> <p>(Note : Minor traffic offence are not counted)</p> <p>I understand that</p> <ol style="list-style-type: none"> 1. this application will be read in conjunction with the information in the following pages. 2. the application should be completed preferably in my own handwriting 3. an application which is not fully completed will not be considered. 4. if, after engagement, it is found that I have made a false declaration in this application, the Company reserves the right to summarily terminate my services. <p>Signature : _____</p> <p>Date : _____</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; padding: 2px;">FOR OFFICE USE ONLY</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">Job Title :</td> </tr> <tr> <td style="padding: 2px;">Starting Date :</td> </tr> <tr> <td style="padding: 2px;">Starting Salary :</td> </tr> <tr> <td style="padding: 2px;">Remarks :</td> </tr> <tr> <td style="padding: 2px;"> <p>Interviewed By : _____ (Name) Division / Section Head</p> <p>Initial : _____</p> <p>Date : _____</p> <p>Interviewed By : _____ (Name) General Manager, Corporate Communication / Manager, HR</p> <p>Initial : _____</p> <p>Date : _____</p> </td> </tr> </tbody> </table>			FOR OFFICE USE ONLY	Job Title :	Starting Date :	Starting Salary :	Remarks :	<p>Interviewed By : _____ (Name) Division / Section Head</p> <p>Initial : _____</p> <p>Date : _____</p> <p>Interviewed By : _____ (Name) General Manager, Corporate Communication / Manager, HR</p> <p>Initial : _____</p> <p>Date : _____</p>		
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Name in English &
Chinese Character
(Underline Surname)

Postal Address
And Telephone



Permanent Address
And Telephone



PERSONAL DETAILS

Sex		I.C No.	
Marital Status		Colour	
Date of Birth		Income Tax No.	
Citizenship		E.P.F. No.	
Race		SOCSO No.	
Religion		Driving Licence - No. - Class	
Languages/Dialect Spoken			
Languages Written			

HEALTH

Height : _____ Weight : _____

Physical disabilities or handicap, if any (e.g. sight, hearing, speech, lameness, heart).

Major illness or accidents (if any) suffered since birth.

FAMILY DETAILS

	Name	Sex	Year of Birth	Occupation
Father				
Mother				
Brothers And Sisters				
Spouse			Date of Birth	Occupation and Employer
Children				

ACTIVITIES

From	Sports / Other Leisure Time / Activities	Membership Of Club, Society, Association etc.	Position or Responsibility Held
At School			
At University/College			
At Present			

EMPLOYMENT DATA

From	To	Employers	Position Held	Starting Salary	Final Salary

Provide on separate sheets of paper brief description of the principal tasks and responsibilities of each job held.

Others : If selected, when are you able to take up employment ? _____

What is your expected salary ? _____

EDUCATION DATA

From	To	Name and Place of School / College / University	Qualification obtained with Grades (If any)	Year Obtained

Please attached a photocopy of each certificate. Also provide on separate sheets the subjects taken and grades obtained in respect of each certificate / diploma / degree / professional qualification.

COURSES CURRENTLY PURSUED

Name of Course(s)	Qualifications Expected	Expected Completion Date



SKILLS / TRAINING UNDERTAKEN

Year	Type of Course	Organisation	Name of Course/Workshop/Seminar

(Please attach a copy of Skills/Training Certificates)