

EDUCATIONAL PARTICULARS				
Name of schools and tertiary institutions attended in chronological order.				
School / College / University	Date		Highest Standard	
	Joined	Left	Passed	Year
Detailed Results of G.C.E. 'O' Level			Detailed Results of G.C.E. 'A' Level	
Year		Year		
Subjects	Grade	Subjects	Grade	
Grade in whole Examination		Grade in whole Examination		
Details of technical / professional / tertiary qualification				
Year	Nature of Course		Certificate / Diploma / Degree / Master	
Further education and training currently pursuing:				
Qualification and Proficiency sought	Date of		Partial Results (if available)	
	Commencement	Expected Completion		
Details of other qualifications and skills:				
Shorthand	Yes / No	w.p.m.	Languages and Dialects Proficiency	
Typewriting	Yes / No	w.p.m.	Written	Spoken
Others (please specify)				
			Scholarships or Awards (if any)	

WORKING EXPERIENCE					
Present employment (if any)	Name and Address _____				
	Position _____ Date: From _____ To _____				
	Basic Salary _____ Allowance (if any) _____ Bonus / AWS _____				
	Reason for leaving _____				
Details of past employment in chronological order.					
Date		Employer	Position	Basic Salary	Reason for Leaving
From (dd/mm/yy)	To (dd/mm/yy)				
AVAILABILITY					
Period of notice you require to give your present employer:					
What salary and other benefits do you expect:					
GENERAL					
Do you have any relative or friend working in this company?					
Name			Relationship	Position in Company	
CHARACTER REFEREES					
Please provide particulars of two persons who are not related to you. They should be responsible persons who know you well with regard to your character and work performance. We may contact the referees stated.					
		Referee 1		Referee 2	
Full Name					
Relationship					
Company Name					
Job Designation					
Years Known					
Email Address					
Tel No.					

OTHER INFORMATION (Please answer the following questions by deleting "Yes" or "No" as appropriate)	
1. Have you suffered, or are suffering from any medical condition, illness, disease, mental illness or physical impairment?	*YES / NO
2. a) Do you have a criminal record in Singapore? b) Have you been convicted in a court of law in any other country (excluding parking offences or criminal records disclosed above)?	*YES / NO *YES / NO
3. Have you been charged with any offence in a court of law in Singapore or in any other country for which the outcome is pending (excluding parking offences)?	*YES / NO
4. Are you aware of being under any current police investigations in Singapore or in any other country following allegations made against you?	*YES / NO
5. Have you been or are you under any financial embarrassment i.e. (a) an undischarged bankrupt, (b) a judgement debtor, (c) have unsecured debts and liabilities of more than 3 months of last-drawn pay, (d) have signed a promissory note or an acknowledgement of indebtedness?	*YES / NO
6. If your answer was "Yes" to any of the questions above, please give details:	
Add anything else which you feel may assist you in your application.	
DECLARATION TO BE SIGNED BY THE APPLICANT	
I authorise investigation of all information provided by me in this application form. I understand that a misrepresentation or omission of facts called for herein will be sufficient cause for cancellation consideration for employment or dismissal from the Company's service if I have been employed. I understand that my employment is subject to a medical examination in which my health must be found to be satisfactory.	
Date _____	Signature _____
FOR OFFICE USE	
Comments by interviewers:	
FOR ADMINISTRATION DEPARTMENT	
Applicant to replace _____ or to fill a new position	
vide requisition ref. _____	
Appointment : _____	Starting Salary _____
Date of Commencement _____	Grade _____