

RIDER GLASS W.L.L, Qatar

Job Application Form



Please Print & Sign
Please enclose a CV with this application

Date of application:	Position applying for:
How did you hear about the position and why are you applying for this role:	

Please type or print the following information above the line.

First Name	Title	Last Name	Qatari ID No.
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Address	Nationality	Country
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Home Telephone	Work Telephone/Mobile	Email address
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Have you applied for a job at Rider Glass before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, give date.	
Have you ever been employed at Rider Glass before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, give date & location (City, Country).	
Are you presently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you legally eligible for employment in Qatar? (Transferrable Work Visa)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a time period when your eligibility to work in Qatar expires?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you under the age of 18? If yes, state age: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
From what date will you be available to work for Rider Glass?	
Available to work: (Please specify)	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary
Are you available to work out of hours when/if necessary?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you worked in Sales & Marketing esp . Building Material, Trading & Contracting/ Aluminium fabrication.	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, explain your product and services:	

EDUCATION

	Name, City, & Country of Institution	Exam Results/ Diploma/Degree Earned	Number of Years attended
Senior School			
College/University			
Post Graduate/Other			

EMPLOYMENT HISTORY/REFERENCES

Please Fill Out in full. Start with your present or last position held.

	Employer #1	Employer #2	Employer #3
Name of Company & Address			
Telephone Number			
Dates Employed	Start Date: End Date:	Start Date: End Date:	Start Date: End Date:
Job Title			
Supervisor Name & Phone Number			
Job Responsibilities			
Reason for Leaving			
May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

CERTIFICATION

List any Certificates or other Qualifications if any:

ADDITIONAL INFORMATION

Any other information/qualification/experience and/or skill that may help you to secure this position?

When you will be available for this job?

What was the last reason for quitting your job?

APPLICANT AGREEMENTS:

The facts furnished in my application for employment and in any curriculum vitae/resume or other documents provided for consideration in the application process are true and complete, without consequential omissions of any kind whatsoever. I understand that false statements, answers or omissions made by me in this application, in any other document provided for consideration in the application process and in any oral communication shall be considered sufficient cause for immediate dismissal if I am employed.

I hereby give RIDER GLASS, the right to make a thorough investigation of my past employment, education, and activities, and I release from all liability all persons and entities supplying such information. I release RIDER GLASS and all persons responding to its enquiries against any liability which might result from making or participating in such investigation. I authorise the persons, or entities named on this application form to give any information regarding me, whether or not it is in their records.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between RIDER GLASS and myself, for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is provided unless made in writing.

If accepted by RIDER GLASS for employment, I hereby agree to abide by the regulations, rules and policies of my employer whether or not in writing as they may be changed from time to time without notice. And I understand that my employment is terminable at will by either party.

I understand that my applications will be considered for 30 days for this particular job and will be discarded after stated period and I understand that if after stated period I will be required to reapply. I have read, understood and agreed to the Applicant Agreements and sign the same of my own free will.

Signature of Applicant

Date