

WESLEY METHODIST SCHOOL SEREMBAN Jalan Lee Sam, 70000 Seremban T: 06-7620068 F: 06-7618790 E: info@sbn.wms.edu.my

APPLICATION FORM FOR

IEACHING	POSITIO	UN	
A. Personal Parti	culars		Affix Photograph
Full Name:			
NRIC:		Nationality:	
Date of birth:		Age:	
Religion:		Gender:	Male / Female
House address:		'	
Telephone:	(H)	(O)	(HP)
E-mail address:		1	
Spoken			
languages: Written languages:			
EPF No.		Income Tax No.	
Marital Status:		No. of children:	
Spouse's Particulars	s (if applicable)):	
Name:			
Occupation:		Contact No:	
Place of		<u>'</u>	,
employment:			
In case of emergend	cy, to notify:		
Name:			
Relationship:			
Address:			
	4.0		Laup
Telephone:	(H)	(O)	(HP)



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B. Educational Background

	Secondary School(s)	Year Attended	Highest Grade Achieved
1			
2			
3			

	Higher Institutions	Year Attended	Degree / Diploma / etc.
1			
2			
3			

	Professional & Other courses:
1	
2	
3	

C. Working Experience

a) Employment

	Name of Company/Institution	Position	Duration
1			
2			
3			
4			

b) Teaching Experience

	Subject	Form	Duration/Year
1			
2			
3			
4			



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D. Managemen	t Experience
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1	Administration	
2	Sports/Games	
3	Clubs & Societies	
4	Uniform Body	
E.	Expected Salary:	RM
		any current medical condition or disabilities?
2	2. Have you ever bee	n hospitalised; if so, when and why?
;	3. When can you star	t work if offered employment?
G.	Professional Refe	rees (not relatives):
_	Name:	
T	Profession:	
	Official Address:	
	Postal Address:	
(Contact No.:	
H. -	Relevant Informat	ion:



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I. Declaration:

I hereby declare that all the above particulars given by me are true and correct. I also agree that should any of the above are found to be false and incorrect, the Council of Education reserves the right to terminate my services with immediate effect without any further claims of liabilities.

Date:	Signature:
FOR OFFICE USE ONLY	
Interviewed by: (i)	(ii)
Department:	
Date:	
Interviewer's comments:	
Decision:	