



EMPLOYMENT APPLICATION FORM

POSITION APPLIED FOR: _____

1. PERSONAL PARTICULARS:-

Name : Mr/Mrs/Ms (As per NRIC) : _____

NRIC No. (New) : _____ NRIC No. (Old): _____

Current Address : _____

Permanent Address : _____

Tel No : (H/P) : _____ (Office) : _____ (Home) : _____

Age : _____ Date of Birth : _____ Place of Birth : _____

Nationality : _____ Race : _____ Religion : _____

Marital Status : Single / Married / Widowed / Divorce

Income Tax No. : _____ SOCSO No. : _____ EPF No. : _____

Possess own car: NO / YES Class : _____ Car No. : _____

Email : _____

(Please enclosed a Photostat copy of NRIC)

2. FAMILY INFORMATION:-

Spouse's Name : (As per NRIC) : _____

NRIC No : _____ H/P No : _____

Occupation : _____ Date of Birth : _____

Name of Firm : _____ Tel No : _____

Name of Children	Sex	Age	Occupation	Name of Firm / School

Father's Name : _____

Occupation : _____ Age : _____

Name of Firm : _____ Tel No : _____

Mother's Name : _____

Occupation : _____ Age : _____

Name of Firm : _____ Tel No : _____

Name of Brothers / Sisters	Sex	Age	Occupation	Name of Firm / School

3. EDUCATION: ACADEMIC & PROFESSIONAL QUALIFICATIONS

Name of School / College / University Attended from Previous to Current	Location	Year		Highest Qualification Attained (Certificate / Diploma / Degree)
		From	To	

Give details of courses attended or presently attending:-

4. EMPLOYMENT HISTORY

IN CHRONOLOGICAL ORDER TO THE PRESENT EMPLOYMENT					
Name & Address of Employer	Period		Position	Last Drawn Salary	Reason For Leaving
	From (Date)	To (Date)			

5. COMPUTER LITERACY SKILLS

	Good	Fair	Poor
1. Microsoft Word			
2. Microsoft Excel			
3. Microsoft PowerPoint			
4. Others:-			

6. LANGUAGE LITERACY

LANGUAGE / DIALECTS	Indicate Good, Fair, Poor			SPECIAL SKILLS / QUALIFICATION
	SPEAK	WRITE	READ	

7. REFEREES :- (List 2 persons excluding relatives & former employer)

Name	Address & Tel No.	Occupation	Years Known

8. GENERAL QUESTIONNAIRE:

Kindly tick the appropriate box

	Yes	No
8.1 Have you ever been charged in court?	<input type="checkbox"/>	<input type="checkbox"/>
8.2 Have you been declared bankrupt?	<input type="checkbox"/>	<input type="checkbox"/>
8.3 Are you pregnant?	<input type="checkbox"/>	<input type="checkbox"/>

8.4 Have you been discharged from employment for whatever reasons?	<input type="checkbox"/>	<input type="checkbox"/>

8.5 Do you suffer from any physical disability, chronic illness, handicap, or any other illness?	<input type="checkbox"/>	<input type="checkbox"/>

Kindly tick the appropriate box		Yes	No
8.6	Do you have any relatives or friends working in this foundation? (If yes, give details) _____	<input type="checkbox"/>	<input type="checkbox"/>
8.7	May we contact your previous employers for a reference check?	<input type="checkbox"/>	<input type="checkbox"/>
8.8	I agree to undergo a pre-employment medical examination as a condition precedent to my appointment	<input type="checkbox"/>	<input type="checkbox"/>
8.9	Details of leisure time, hobbies, recreation and games:- _____ _____		
8.10	Membership / position held in Trade / Professional Association, Club, Societies or religion bodies:- _____ _____ _____		

9. IF SELECTED

9.1 Notice period required : _____

9.2 Are you prepared to be transferred to any existing and future NKF Branch? : _____

9.3 Expected Monthly Salary : _____

10. NEXT OF KIN

10.1 Next of Kin

Name : _____

Relationship : _____

Address : _____

Tel No : _____

In at least 50 words, describe your reasons for applying to join NKF and tell us why we should employ you?

DECLARATION

I declare that the information given in this application is true and complete. I understand any misleading information or willful omission is sufficient reason for refusal of or dismissal from employment.

I hereby declare that I have read and understood the contents of the privacy notice of NKF displayed on the NKF website at www.nkf.org.my

I hereby further confirm my consent for NKF to use my personal data for the purposes and to the parties stated in the privacy notice.

Date:

Signature of Applicant