



HASMIT SHIELD ROOFING MANUFACTURE SDN BHD

Lot 70, Tapak Perindustrian Beribi II, Bandar Seri Begawan, Brunei Darussalam,

P.O. Box 514, Gadong, BE3978,

Telephone: +673 242 1594 Fax: +673 242 1648 Email: marketing@hasmit.com Website: www.hasmit.com

POSITION APPLIED FOR _____

APPLICANT'S PARTICULARS

NAME (<i>in block letters, according to NRIC</i>)		NAME IN CHINESE (<i>if applicable</i>)	
ADDRESS (<i>Current</i>)			
ADDRESS (<i>Permanent</i>)			
TEL NO. (<i>Office</i>) :-		TEL NO. (<i>Office</i>) :-	
HANDPHONE NO:-		E-MAIL ADDRESS:	
DATE OF BIRTH	PLACE OF BIRTH	NATIONALITY	
NRIC NO:	AGE	SEX	
RACE			
MARITAL STATUS			
Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/>			
INTEREST & HOBBIES			
SPORTS YOU PLAY (AND THE HIGHEST LEVEL OF PARTICIPATION WHILE IN SCHOLL, COLLEGE, UNIVERSITY AND/OR SOCIETY			
NAME CLUBS, SOCIETIES AND/OR ORGANISATIONS YOU ARE MEMBER OF AND THE POSITION HELD			

LANGUAGE & DIALECTS PROFICIENCY

	<i>Written</i>			<i>Spoken</i>		
B. MELAYU	Good	Fair	Poor	Good	Fair	Poor
ENGLISH	Good	Fair	Poor	Good	Fair	Poor
MANDARIN	Good	Fair	Poor	Good	Fair	Poor
DIALECT SPOKEN						
OTHER LANGUAGES						

FAMILY BACKGROUND

Immediate Family Members	Name	Age	Occupation	Name of Company
Father				
Mother				
Spouse				

Children	Name	Sex	Age	Education Level	School

Siblings	Name	Sex	Age	Education Level / Occupation	School / Name of Company

EDUCATION & QUALIFICATIONS

SECONDARY

Name of School / Institution	Year		Certificate	Grade
	From	To		

TERTIARY & PROFESSIONAL

Name of School / Institution	Year		Certificate	Grade
	From	To		

BUSINESS & TECHNICAL TRAINING ATTENDED

COMPUTER	
TYPING	
DRIVING (<i>CLASS</i>)	
OTHERS	

PROFESSIONAL MEMBERSHIP OR LICENCES HELD

Name of Institution	Location	Membership / Cert / Licence	Year Obtained

COURSES & SEMINARS ATTENDED

Courses / Seminars	Organisers	Location	Year Attended

COURSES & SEMINARS CURRENTLY PURSUING

Name of School / Institution	Course	Year		Qualification
		From	To	

EMPLOYMENT HISTORY

PREVIOUS EMPLOYMENT

Name & Address of Company	Month / Year		Position / Job Responsibilities	Salary		Reason for Leaving
	From	To		Initial	Last	

PRESENT EMPLOYMENT

NAME & ADDRESS OF COMPANY	ENTRY POSITION / DEPARTMENT	PRESENT POSITION / DEPARTMENT
JOB RESPONSIBILITIES	INITIAL SALARY	PRESENT SALARY
	DATE JOINED	
LEAVE REASON		TO WHOM RESPONSIBLE

REFERENCES

NAME	TEL NO	OCCUPATION	NAME OF COMPANY	PERIOD KNOWN

DECLARATION

I hereby declare that the information given by me in this application for employment is true and correct and I agree and accept that if any part of my declaration is false and incorrect, the company reserves the right to dismiss my services with or without my notice.

APPLICANT'S SIGNATURE	DATE
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