

EMPLOYMENT APPLICATION FORM

| A) APPLICATION INSTRUCTIONS | | | |
|--|---------------------|-------------------|--|
| 1) This application form should be completed and returned with a passport size photograph. 2) Attached Photocopies of educational certificates (s), testimonials and identity card. 3) Please submit completed form to: MOC Sdn Bhd, Human Resource Manager, LTS 4507, SPG 73, KG SG DUHON, KUALA BELAIT, KA3131, BRUNEI DARUSSALAM | | | Applicant's Passport size Photograph |
| B) POSITIONS APPLIED (Please state post in order of preference) | | | |
| 1) | | 2) | |
| C) SALARY EXPECTED | | | |
| 1) | | 2) | |
| D) APPLICANTS DATA | | | |
| Full Name: | | Race: | |
| Date of Birth: | | Citizenship: | |
| Sex: | Male () Female () | I/C No./ Colour: | |
| Religion: | | Passport No: | |
| Marital Status: | | Languages Spoken: | |
| Driver Licence: | Yes () No () | Driving Class No: | |
| Permanent Address: Telephone: | | | |
| Address In Brunei: Telephone: | | | |
| E) PLEASE STATE RELATIVES OR FRIENDS EMPLOYED IN THE COMPANY | | | |
| Name: | | Relation: | |
| 1) | | 1) | |
| 2) | | 2) | |
| F) EDUCATION | | | |
| | NAME AND LOCATION | HIGHEST STANDARD | YEAR |
| 1)Primary School | | | |
| 2)College | | | |
| 3)University | | | |
| 4) Any Other Skills, Training or Certificates | | | |

| G) EMPLOYMENT HISTORY | | | |
|------------------------------|----------------------------------|-----------------------------|----------------------------|
| YEAR | EMPLOYER NAME AND ADDRESS | Job Title and Salary | Reasons For Leaving |
| 1) | | | |
| 2) | | | |
| 3) | | | |
| 4) | | | |

H) MEDICAL DETAILS

1) Have you had any illness or medical condition which may prevent you from attending work regularly in the future?
 Yes () No ()

2) If (YES) please provide details here:

I) CRIMINAL CONVICTIONS (Please Tick ✓)

1) Have you been convicted for any crime? Yes () No ()

If (YES) please specify:

2) Do you have any habits such as excessive alcohol, drug addiction or gambling Yes () No ()

J) DECLARATION

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature Of Applicant: _____ Date: _____

FOR PERSONNEL DEPARTMENT USE

| | |
|-----------------------|-----------------|
| Date Received: | Remarks: |
| | |