

No. Form :
 JBH/HRM/P01FR02 (V01-090917)

Effective Date :

APPLICATION FOR EMPLOYMENT

<p>IMPORTANT INSTRUCTIONS:</p> <p>i) No field should be left blank ii) Incomplete applications and those received after due date will not be entertained.</p>	Please attach recent photograph
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Position Applied (ALL CAPS):							
PERSONAL INFORMATION							
Name					I/C no.		
Gender	Race	Religion	Date of Birth	Place of Birth	Age	Nationality	Marital Status
Permanent Address							
Mailing Address							
Contact No:	(H/P)			(Home)			Email:
EPF No:	SOCSCO No:			Account No & Bank:			
LANGUAGES							
Verbal				Writing			
EDUCATION DETAILS							
Name of University/College/School	Year	Degree/Diploma/Certificate	CGPA	Degree & Major			
SKILLS/CERTIFICATIONS							
List technical or specialized skills/credentials relevant to this job, including knowledge of any computer and language skill							
HOBBIES/ACTIVITIES							
Please list the extra curricular previously/currently involved							

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EMPLOYMENT HISTORY

Position Title	Organization Name/Address	Salary (RM)	Length of Service		Reason for Leaving
			From	To	

FAMILY INFORMATIONS

Spouse's name	:		I/C no	:	
Permanent address	:				
Working	:		Income tax no	:	
Number of dependents					
No		Name	DOB	Name of school/college/University	
In any emergency case please contact;					
No		Name	Contact no.	Relationship	

Health declaration;

Do you have or under treatment for the following diseases;

Asthma	:	Yes/No	Epilepsy	:	Yes/No
High blood pressure	:	Yes/No	Any type of cancer	:	Yes/No
Heart attack	:	Yes/No	Contagious disease	:	Yes/No
Dialysis treatment	:	Yes/No	Pregnant	:	Yes/No

APPLICANT'S DECLARATION

I certify that the above statements are correct. I understand that any false information (or omissions) in this application, or its supporting documents, will be sufficient grounds for refusal to hire me or termination without notice. I further understand that the J-Biotech has the right to review and investigate my education, previous employment, criminal records and other background data.

Date:

Applicant's Signature: