



A. Personal Details

Applicant's Name: IC Number:
Home Phone: Mobile Phone:
Email Address: Age: Race:
Gender: Marital Status: Number of Children:
Date of Birth: Place of Birth:
Nationality: Religion:
Current Address:
.....
City: State & Postcode Number:
Position Applied: Expected Salary: RM
Computer Skill:

B. Family Members

Name	Relationship	Job / School	Company

In case of emergency - Person to contact: Contact No.:

C. Education, Training and Experience

	Name Of School/College/University	Date		Qualification
		From	To	
Training Institute				
University				
College				
Secondary School				
Other				

D. Working Experience

Company	Date		Last Position Held	Salary	Reason for Leaving
	Start	End			



E. Language/Dialect

Language/ Dialect	Proficiency Levels								
	Speaking			Reading			Writing		
	Good	Fair	Poor	Good	Fair	Poor	Good	Fair	Poor
BM									
English									
Chinese									
Others:									

F. General

1. Do you have criminal record?
2. Have you been terminated / dismissed from previous employer? (Yes / No)
3. Do you have any relatives/friends currently work in the company?
4. Do you have own transportation?
5. Date available for employment:

G. Reference

Name	Post	Contact No
1.
2.

H. Medical History

1. Any Medical History (Hypertension, Diabetes, etc)? (Yes/No)
 If Yes, Please state.....
2. Any past major surgery? (Yes/No)
 If Yes, Please state.....
3. Do you smoke? (Yes/No)
4. Do you drink alcohol? (Yes/No)

Height:cm Weight:kg

I HEREBY CONFIRM ALL THE ABOVE DETAILS TO BE TRUE AND CORRECT. I AUTHORISE BORNEO MEDICAL CENTRE (BMC) TO CARRY OUT REFERENCE CHECK WITH PAST EMPLOYER(S) AND REFEREE(S) IN CONNECTION WITH THIS APPLICATION. I UNDERSTAND THAT ANY MISPRESENTATION OR OMISSION OF INFORMATION WILL BE SUFFICIENT REASONS FOR WITHDRAWAL OF AN OFFER OR SUBSEQUENT DISMISSAL, IF EMPLOYED.

I HEREBY HAD ALSO GIVEN MY CONSENT TO BMC TO KEEP, PROCESS AND DISCLOSE MY PERSONAL DATA FOR EMPLOYMENT PURPOSES.

Applicant's Signature: _____ Date: _____