

## PERTUBUHAN KRISTIAN DESA AMAL JIREH (DESA AMAL JIREH CHRISTIAN ASSOCIATION)

(Pendaftaran Pertubuhan No: 562) Lot 340, Jalan Broga (1st Kilometre)

43500 Semenyih, Selangor Darul Ehsan, Malaysia.

Correspondence Address: P.O. Box 20, 43007 Kajang , Selangor D.E., Malaysia Tel: 03-8724 5158, 8724 5153 Fax: 03-8724 5160 Email: desaamaljireh@gmail.com

## **JOB APPLICATION FORM**

Recent Non-returnable Photograph

Name:				Age :		
Position applied:			Gender: Male/Female			
Address:						
I.C. No	Place of Bi	rth				
ce/Dialect: Religion: _			Citizenship:			
Income Tax: Socso: Yes No Yes	E.P.F					
Marital Status: Single/ Married/ Divorce	ed/ Widowed He	eight:	We	ight :		
Tel. No. (HP)	(Home)	(Of	fice)			
Email:						
FAMILY: (Spouse, Children, Parents, I	Brothers & Sisters o	nly)				
NAME		RELATIONSHIP	GENDER	AGE	OCCUPATION	
IN CASE OF EMERGENCY, NOTIFY		OCCU	ΓΙΟΝSHIP: PATION: ACT NO.:	1		

		TEL. NO			OCCUPATIO	PERIOD KNOWN
		•		•		•
EDUCATIONAL QUALIFICATIO	NS					
In Chronological Order)* Attach Pho	tostate copie	S				
SCHOOL/COLLEGE/UNIVERSITY	FROM	ТО	TO COURSE OF S			QUALIFICATION
	MM/YY	MM/YY				
·	onological (	•	BASIC	FROM	ТО	REASON FOR LEAVIN
·	_	•	BASIC SALARY	FROM MM/YY	TO MM/YY	REASON FOR LEAVIN
	_	•				REASON FOR LEAVIN
·	_	•				REASON FOR LEAVIN
·	_	•				REASON FOR LEAVIN
	_	•				REASON FOR LEAVIN
NAME OF COMPANY	POSITION H	•				REASON FOR LEAVIN
Expected salary :	POSITION H	•				REASON FOR LEAVIN
Expected salary :	POSITION H	ELD	SALARY	MM/YY	MM/YY	
Expected salary :	POSITION H	ELD	SALARY	MM/YY	MM/YY	
Expected salary :	POSITION H	ELD	SALARY	MM/YY	MM/YY	
Expected salary :  LANGUAGES & DIALECTS: Written & Spoken :  Spoken only: Have you committed in any criminal r	POSITION H	Yes, it is _	SALARY	MM/YY	MM/YY	
Expected salary :  LANGUAGES & DIALECTS:  Written & Spoken :  Spoken only:  Have you committed in any criminal r	POSITION H	Yes, it is _	SALARY	MM/YY	MM/YY	
EMPLOYMENT HISTORY (In Chroname of Company  Expected salary:  LANGUAGES & DIALECTS:  Written & Spoken:  Spoken only:  Have you committed in any criminal relative you has any chronic health issues to declare that all information	POSITION H	Yes, it is _	SALARY	MM/YY	MM/YY	

DATE: SIGNATURE:

\*Delete as applicable

EMPLOYERS.