# Job Application Form

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| **Position applied for:** |  | Heard about position from: |  |
| Expected Salary:  Name in NRIC: |  | Last 4 characters of NRIC: |  |
|  |
| Date of Birth: |  | Mobile: |  |
| Home address: |  | Email: |  |
|  |  |  |  |
| Nationality: |  | Languages/dialects: |  |

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| **Relevant Academic qualifications** | | | |
| **Period** (mm-yyyy to mm-yyyy) | **School / Institution** | **Course / Major** | **Highest level obtained** |
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| **Employment history** | | | | | | | | | | | | | | |
| Employment status: | | | | Retired Self-employed Unemployed Employed | | | | | | | | | | |
| Name of employer/company: | | | | | |  | | | | | Position: | |  | |
| Office address: | | |  | | | | | | | | Tel (O): | |  | |
|  | | |  | | | | | | | |  | |  | |
| **Period**  (mm-yyyy to mm-yyyy) | | | | | **Firm/ Institution**  **(in chronological order)** | | **Position Held** | | | **Key Responsibilities** | | | | |
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| **Referees** (Please provide 2) | | | | | | | | | | | | | | |
| Name: |  | | | | | | | Title: |  | | | | Relationship: |  |
| Address: | |  | | | | | | | | | Mobile: | |  | |
|  | | | | | | | | | | | Email: |  | | |
|  | | | | | | | | | | | | | | |
| Name: |  | | | | | | | Title: |  | | | | Relationship: |  |
| Address: | |  | | | | | | | | | Mobile: | |  | |
|  | | | | | | | | | | | Email: |  | | |
| **Other Information**  Notice Required (to end present employment): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (weeks)  Reason for Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | |
| **Emergency Contact** | | | | | | | | | | | | | | |
| Name: |  | | | | | | | Title: |  | | | | Relationship: |  |
| Address: | |  | | | | | | | | | Mobile: | |  | |
|  | | | | | | | | | | | Email: |  | | |

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| **Declaration**   1. I hereby give consent to my data being used for the purposes of recruitment and employment.   (2) I declare that the information provided in this application and the attachments (if any) is true and correct to the best of my knowledge and that I have not wilfully suppressed any material fact. I accept that if any of the information given by me in this application is in any way false or incorrect, my application may be rejected, any offer of employment may be withdrawn or my employment with the Company may be terminated summarily or I may be dismissed. | | | |
| Signature: |  | Date: |  |
| We regret to inform you that **only shortlisted candidates will be contacted** for an interview. | | | |
| Please email/send the completed form to | | | |
| Human Resource  Calvary Community Care  147 Potong Pasir Avenue 1 #02-83 Singapore 350147 | | | |
| Phone: 6281 1866 • Email: care@calvary.sg | | | |

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**For Official Use:**

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| Status of Application: Shortlisted Interview Date: \_\_\_\_\_\_\_\_ Hired Date: \_\_\_\_\_\_\_\_ Not Hired Withdrawn | | | |
| Staff: |  | Date: |  |
|  | |  | |