**APPLICATION FOR EMPLOYMENT**

Mr.

SURNAME Mrs.

Miss

POSITION APPLIED FOR:

|  |  |
| --- | --- |
| Attach recent passport size photograph  How did you hear of this vacancy?  If by newspaper advertisement. Please give the name of newspaper and date of advertisement. |  |

**PERSONAL HISTORY**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname | Forename (s) | Date of Birth | Place of Birth |

|  |  |
| --- | --- |
| Address Present | Marital Status  Single ( ) Married ( )  Widow/er ( ) Divorced ( ) |
| Permanent | Children : Please give dates of birth  Boys:-  Girls:- |
| Your E-mail ID: | |

|  |  |
| --- | --- |
| Telephone Number (s)  State of Origin: Nationality: | Disabilities, if any  Present State of Health |

|  |  |
| --- | --- |
| Name of father, spouse : | Occupation: |

**EDUCATION DETAILS**

**ACADEMIC**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of School / College | Year of Passing | Examinations taken & result | % of marks | Division/ Distinction |
|  |  |  |  |  |

**PROFESSIONAL TECHNICAL & COMMERCIAL EDUCATION**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| University, Tech. Institute | Period | | Degree Diploma | % of Marks | Class / Honors | Special Subjects |
| From | To |
|  |  |  |  |  |  |  |

NOTE : Please attach copies of certificate relating to Date of Birth, Academic / Professional of Technical qualifications and previous employment record.

**LANGUAGE KNOWN**

|  |
| --- |
| Spoken: Written: |

**EMPLOYMENT HISTORY** (Beginning with first job)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name & Address of employer | Job Title | Dates | | Total Earnings | Reason for Leaving |
| From | To |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1st Job |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 2nd Job |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 3rd Job |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 4th Job |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 5th Job |  |  |  |  |  |  |

**PRESENT JOB** (or most recent if currently unemployed)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of Employer: | | Dates | | Total Earnings | Reason for Seeking Job / Change |
| From | To |
| Address  Telephone No | Job Title |  |  |  |  |
| Nature of Business | | Name of Immediate Superior  May we Refer? Yes / No | | | |
| Total no. of Employees  No. of Employees Reporting you: | | Outline your job Responsibilities | | | |

**PRESENT REMUNARATION DETAILS (per month)**

|  |
| --- |
| Salary Allowance |

|  |
| --- |
| Benefits (Including Retrial Benefits) |

|  |  |
| --- | --- |
| Reasons for Leaving (or for seeking change) | How much notice is required to end your present employment?  When is the earliest you can join? |

|  |  |
| --- | --- |
| What remuneration do you expect?  Have you been employed  By this company before Yes / No | Have you applied before? Yes / No  If yes, position applied for  And when |

# REFERENCE

|  |
| --- |
| Name, address and phone numbers of two persons (not related to you) who have known you for at least two years and can be approached for reference.  1. 2. |

**RELATIVES**

|  |
| --- |
| Are you related to anyone employed by us? Yes/No If Yes.  Name: Position Held Unit  Nature of relationship: |

**GENERAL**

|  |
| --- |
| Hobbies and interests extracurricular activities  (i). When you were younger  (ii). And now |

|  |  |
| --- | --- |
| Do you own a Car / Two Wheeler?  Have you a current  Driving License | Make:  Type:  Year of first registered  Any endorsements? |

|  |
| --- |
| Did you suffer from any contagious disease or serious illness during the last 3 years?  Have you ever been refused a policy by Life Insurance Corporation? If, Yes  Reason for refusal |

|  |
| --- |
| Are you a member of Employees Provident Fund Scheme? Yes / No  If Yes A/c no. And your employer’s code no.  Are you a member of Family Pension Scheme? Yes / No  If Yes A/c no. |

|  |
| --- |
| Please give a brief summary of your family background |