

PERSONAL PARTICULARS										
Name as per Passport		First Name:			Surname:					
Date of Birth (DD-Mmm-YY)				Nationality:						
Residential Address:										
Contact No	Residence:		Mobile:		Email:					
Current Contact Address:										
CURRENT STATUS										
Position Applied For:										
Years of Experience		Domestic:			Overseas:					
Earliest Availability Date:				Notice Period Required:						
Do You Have Any Visa Ban (eg Valid Visa in Passport)? If so, please give details										
Are You Able To Obtain an NOC (Non Objection Certificate) (may apply to those who have worked in GCC country previously)					Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Not Applicable	<input type="checkbox"/>
DETAILS ABOUT LAST / CURRENT EMPLOYMENT										
Currently Employed:		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Position:				
Current/Last Salary Package:				Employer:						
Standard Working Hrs per Week:				Last/Current Project:						
Other Allowances if Any:				Location:						
Overtime Claim:		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Overtime Rate:				
Leave Rotation:				Paid Leave:		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Expected Salary:										
MEDICAL HISTORY										
1. Do You Have a History of:				Please tick where applicable						
				No	Yes	If Yes, please specify				
a. Hypertension or Heart Problems				<input type="checkbox"/>	<input type="checkbox"/>					
b. Lung Problems (Tuberculosis, Lung Scar, etc)				<input type="checkbox"/>	<input type="checkbox"/>					
c. Eye Problems (Color Blindness, etc)				<input type="checkbox"/>	<input type="checkbox"/>					
d. Communicable / Infectious Diseases (eg Hepatitis, etc)				<input type="checkbox"/>	<input type="checkbox"/>					
2. Have you had any major Medical Treatment or Operation in the last 2 years				<input type="checkbox"/>	<input type="checkbox"/>					
3. Have you any other Health Issue				<input type="checkbox"/>	<input type="checkbox"/>					
<p><i>Note: Some medical issues may prevent Staff from being assigned to certain countries in keeping with Work regulations of those countries. It is therefore important to advise of possible issues or treatment. Failure to do so could result in failing of Medical and possible deportation in accordance with Work regulations of those countries.</i></p>										

APPLICATION FOR EMPLOYMENT

Date