



**DATA OF IMMEDIATE FAMILY MEMBERS (Parents/Spouse/Children)**

Name	Relationship	Contact No.	Occupation/Employer

**In the event of an emergency, who should be contacted?**

Name	Relationship	Address	Contact No.

**SKILLS**

**Software**    ( ) MS Office                      ( ) Lotus Notes                      ( ) SAP/ MES                      ( ) Internet

Other skills, please state:

**LANGUAGES AND DIALECTS (State the Proficiency as Excellent/Good/Fair/Elementary)**

Foreign Language	Speak	Read	Write

What are your personal interests and hobbies? \_\_\_\_\_

Have you ever suffered from any serious illness?                       No                       Yes, \_\_\_\_\_  
 (If yes, please specify)

Do you have any relatives/friends working in our company?                       No                       Yes, \_\_\_\_\_  
 (If yes, please specify)

Have you ever been dismissed from a job? If so, for what reason?                       No                       Yes, \_\_\_\_\_  
 (If yes, please specify)

Have you ever been convicted by a court of law? If so, elaborate.                       No                       Yes, \_\_\_\_\_  
 (If yes, please specify)

Do you have color blindness?                       No                       Yes, \_\_\_\_\_  
 (If yes, please specify)

Are you willing to work rotating shift?                       No                       Yes, \_\_\_\_\_  
 (If yes, please specify)

Are you willing to work overtime/ on weekends?                       No                       Yes, \_\_\_\_\_  
 (If yes, please specify)

Are you willing to relocate to other countries, if required?                       No                       Yes, \_\_\_\_\_  
 (If yes, please specify)

**Expected Salary:** \_\_\_\_\_                      **Notice Period:** \_\_\_\_\_

**EMPLOYMENT/PERSONAL REFERENCES**

Name:	Name:
Designation:	Designation:
Company Name:	Company Name:
Address:	Address:
Contact No:	Contact No:

References (refrees will NOT be approached without your permission)

**DECLARATION**

I declare that the information above are true and that any false or misleading statements made by me will be subject to immediate dismissal without any compensation, if employed.

In the event of this application being unsuccessful, my information may be retained in the confidential file.

Signature of Applicant: \_\_\_\_\_                      Date: \_\_\_\_\_