



SIKH WELFARE COUNCIL

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Email: info@siwec.org Website: www.siwec.org

Mailing Address: Towner P O BOX 1468 SINGAPORE 913237

Unique Entity Number: S98SS0018L

ALL INFORMATION PROVIDED SHALL BE HELD STRICTLY CONFIDENTIAL

- Please attach copies of certificates and testimonials to this form.
- Upon employment, this document and all attachments will be filed in your personal file for future reference.
- If, upon employment, it is discovered that false or inaccurate information has been provided herein, the Company reserves the right to terminate the employee's service.

1. POSITION APPLIED FOR	
Position:	Expected Salary:
Notice Period For Current Employer (if any):	Current Salary:

2. PERSONAL PARTICULARS			
Name:	Chinese Characters (if any):	Gender*: M / F	
Address:			
Place of Birth:	Date of Birth:	Age:	Nationality:
Race:	Dialect Group:	Religion:	
Telephone Numbers:		(Mobile)	(Home)
NRIC / FIN No:		Colour of NRIC: Pink / Blue / NA	
Passport No.:	Country of Issue:	Issued:	Expires:
Driver's Licence No:	National Service*: Yes / No / NA	Marital Status:	
Classes of Vehicles:	Vocation:		

3. PARTICULARS OF IMMEDIATE FAMILY (spouse and children if married, parents and siblings if unmarried)			
Name	Relationship	Date of Birth	Occupation

4. EDUCATIONAL BACKGROUND					
Name of School / College / University*	Country	From	To	Highest Qualification Obtained	Year Obtained

- For GCE 'N', 'O' and 'A' levels, please fill in the qualification attained followed by the number of subjects passed eg. GCE 'O' Levels, 5 passes.
- For others, please write the level attained followed by any distinction eg. BSc in Management (1st Class)

* Please circle where applicable.

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5. OTHER ACADEMIC OR PROFESSIONAL QUALIFICATIONS			
Institution	Country	Qualification	Year Obtained

For professional courses, please fill in the name of the professional body eg. Institute of Chartered Secretaries and Administrators.

6. IF YOU ARE CURRENTLY ATTENDING A COURSE, PLEASE PROVIDE THE FOLLOWING INFORMATION:		
Course of Study:	Period From:	To:
Name of Institute:		

7. LANGUAGE / DIALECT PROFICIENCY		
Language / Dialect	Written Proficiency	Spoken Proficiency

8. EXTRA-CURRICULAR ACTIVITIES
Membership of Club / Society / Association / Etc.
Sports / Games / Hobbies / Etc.

9. EMPLOYMENT HISTORY (In reverse chronological order, i.e. current or most recent first.)			
From:	To:	Company:	
Designation:		Current / Last Drawn Salary:	
From:	To:	Company:	
Designation:		Last Drawn Salary:	
From:	To:	Company:	
Designation:		Last Drawn Salary:	
From:	To:	Company:	
Designation:		Last Drawn Salary:	
May we contact your previous employers for reference information?*			
			Yes No

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10. REPORTING RELATIONSHIP (your current or most recent employer)	
No. of staff in your department:	No. of staff reporting to your supervisor:
To whom did you report:	
What are the job titles of the staff you supervised (if any):	

11. PEOPLE TO CONTACT IN EMERGENCY		
Name:	Relationship:	Contact Number:
Contact Address:		
Name:	Relationship:	
Contact Address;	Contact Number:	

12. CHARACTER REFERENCES (please exclude relatives)				
Name	Tel No.	Name of Employer	Designation	Years Known

13. PLEASE INDICATE IF YOU HAVE ANY RELATIVES OR FRIENDS WORKING FOR THIS COMPANY		
Name	Relationship	Position

14. OTHER INFORMATION		
<i>NB: The information you provide in this section shall not prejudice your employment in any way.</i>		
(a) Have you ever been convicted in a Court of Law in any country?	Yes	No
(b) Have you ever been dismissed or suspended from the service of any employer?	Yes	No
(c) Have you ever or are you suffering from any physical impairment or disease?	Yes	No
(d) Are you presently in debt, an undischarged or discharged bankrupt?	Yes	No
(e) For female applicants only: Are you presently pregnant?	Yes	No
Where any of the above answers are "Yes", please provide additional details here. If more space is required, please use the reverse of this page.		

15. DECLARATION

I, the undersigned, hereby declare that:

- i. Any false statement made by me on this application or any supplement thereto will be sufficient for disqualification from any offer of employment or dismissal if appointed. The wilful suppression of any material fact will be similarly penalised.
- ii. I hereby authorise the Sikh Welfare Council to make references to all my past employers. However, reference to my current employer may only be made with my prior permission so long as I am still in their employment.

Date	Signature of Applicant
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For Official Use Only

Interviewed By:	Comments / Remarks*: Very Good/ Good/ Average/ Poor
Recommendation*: Employ to	/ KIV / Refer 2 nd Interview

* Please circle where applicable.