

## **EMPLOYMENT APPLICATION FORM**

(Please fill in BLOCK LETTERS)

1. POSITION APPLYING	☐ TEACHER	Subject/ Year G	iroup:	☐ TEACHING ASSISTANT	
FOR (Please tick):				:	
2. PERSONAL DETAILS					
Full Name (As stated in National Registration Identification Card or Passport. Please <u>underline</u> surname)					
Aliases / Other Names used in the past (if applicable):					
Correspondence Address:				Photo	
Permanent Address:			Tel No :		
			Handphone No:		
			Email Address:		
Years living outside birth cour		1	Carandam Citia anabin	NDIC/D	
Date of Birth: / / (DD/MM/YY)	Languages spoken:	Nationality:	Secondary Citizenship (if any):	NRIC/Passport No:	
Gender:	Languages written:	Race:	Marital Status:		
☐Male ☐Female	Male ☐ Female No. of Children:		No. of Children:		
OTHER INFORMATION	<b>:</b>				
(a) Have you ever suffered fr	om any physical disabilit	y, injury or any phy	sical/mental illness?		
YES / NO If YES, please				<del></del>	
(b) Have you ever been disch			o misconduct?		
YES / NO If YES, please (			ny crima?		
(c) Have you ever been arrested for violation of any law / conviction of any crime?  YES / NO If YES, please state nature of violation and date:					
3. IF OFFERED EMPLOYME	ENT BY HELP:				
Expected Monthly Salary:  Date available to start work: / / (DD/MM/YY)					
4. TERTIARY EDUCATION (	including courses in wh	nich you are curre	ntly enrolled, starting wi	th the highest)	
Dates (From/To)	University/College		Principal Subject or Major/Minor	Type of Degree & Class or Grade Point Average	
From:					
То :					
From:					
To :					
From:					
To :					

5. HIGHER SECONDARY SCHOOL EDUCATION – HSC/STPM/GCE 'A' LEVEL							
Dates (From/To)	School		Grades Obtained				
From: To:							
	6. SECONDARY SCHOOL EDUCATION – MCE/SPM/GCE 'O' LEVEL						
Dates (From/To)	School	Grades Obtained					
From:							
To:							
	ACHING AND OTHER QUALIFICATIONS		Type of Membership				
Dates (From/To)	Professional Bo	Professional Body					
From: To:							
From: To:							
From:							
То:							
8. IF APPLYING FOR T	HE POST OF TEACHER, PLEASE SPECIFY SU	BJECTS YOU ARE ABLE TO TEA	iCH:				
1)	3)	5)					
2)	4)	6)					
9. HOW DID YOU HEAR ABOUT THE EMPLOYMENT OPPORTUNITY AT HELP?							
10. DO YOU HAVE ANY	RELATIVES CURRENTLY EMPLOYED AT HEL	P? YES/NO					
If YES, please list the nan	ne(s):						
11. EMPLOYMENT HIS	STORY (Starting from current)						
Dates	Organization	Position	Reason for Leaving				
From:	Name:						
	Address:						
То:		Monthly Salary					
	Tel. No:						
Brief description of your work and responsibilities:							

Dates	Organization	<u> </u>	Position	Reason for Leaving
From:	Name:			
	Address:		_	
	Address.			
To :			Monthly Salary	
	Tel. No:			
Brief description of your	work and responsibilities:			
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Dates	Organization		Position	Reason for Leaving
From:	Name:			
	Address:			
To :			Monthly Salary	
	Tel. No:			
Brief description of your	work and responsibilities:		-	
If there are any gaps in	your work history, please state t	he reasons here:		
12. MAJOR SOCIAL, L	EISURE AND SPORTING ACTIV	ITIES AND ACHI	EVEMENTS	
12 REEERENCES (Adia:	mum 3; Please include your Principal	/Lina Managar fra	n vour current company as a refer	nal
13. REFERENCES (WIIIIII	Company &	Years		
Name	Designation	Known	Email Address	Tel. No.
a.				
b.				
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HELP International School is committed to safeguarding and promoting the welfare of children and young people, and expects all staff and volunteers to share this commitment. As such, all offers of employment are subject to a criminal record check (DBS or equivalent).

	e this section to elabor nsideration of your app		r pages and to provide an	y other information you regard as	helpful for our	
	DECLARATION BY AP	PLICANT:				
1.	•	=		e are true and complete to the be may result in termination of my en	-	
2.	I understand and agre	ee that HELP shall use the in	formation given herein and	d the enclosed Curriculum Vitae to	verify my academic	
3.	and employment records, to obtain medical records, and for any other purposes incidental to my employment at HELP.  If and when employed by HELP, I authorize and grant HELP the right to use my personal information such as name, credentials,					
٠.		•	= =	and electronic means, in specially		
	-		= :	websites and the like for training		
	continuation and imp	rovement of the HELP Grou	p's program(s) as and whe	n it is deemed fit and necessary at	no cost.	
4.	exam questions and	answer schemes prepared b	y me as an academic staf	moral rights attached to the notes f during my tenure at HELP belong		
5.	•	and/or its authorized repres	-	r HELP. in, I must do so in writing to HELP a	and the action taken	
٦.	_	•	•	LP, I agree to use the technology		
	-			and lawful manner and understa	_	
	prohibited to transm	it emails containing confide	ntial, defamatory, offensiv	ve, or obscene materials. HELP sha	II not be held liable	
	for any damage to the persons and /or properties caused by the transmission of any materials through emails by its employees.					
6.	_	de by all the rules and regul				
7.			•	-disclosed agreement which will b	e effective from the	
_		and shall survive terminatio				
8.		=		appointed by HELP and its de	= =	
	•	ed for employment promotic		rough a consumer report and/or a	і раскугочно спеск	
	report to be generate	ta for employment promotiv	on, reassignment of recent	non us un employee.		
Applicant's Signature:			Date:			
		F	OR OFFICE USE ON	LY		
Int	erview Comments & R	ecommendation (please tic	k the relevant checkbox)	Interviewer	Date	
			·	interviewer	Date	
	☐ Appoint	☐ Reject	□ KIV	Name:		
	дрроше	neject				
	☐ Appoint	☐ Reject	□ KIV	Name:		
	ppot					
	_	_	_	Name:	1	
	$\square$ Appoint	☐ Reject	□ĸıv			