

## **JOB APPLICATION FORM**

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| Instructions:   | • Please co    | mplete the form    | in BLOCK LETTERS ar  | nd attached one no  | on-returnable rece  | nt passport | size phot | to.           |           |       |
|---|----------------|--------------------|----------------------|---------------------|---------------------|-------------|-----------|---------------|-----------|-------|
| Position Appl   | lied for :     |                    |                      |                     |                     |             |           | Date : _      |           |       |
| PERSONAL DETAILS  |                |                    |                      |                     |                     |             |           |               |           |       |
| Full Name :   |                |                    |                      |                     |                     |             |           |               |           |       |
| Date of Birth:  |                |                    |                      | Birth Place :       |                     |             |           |               |           |       |
| Home Address :  | !              |                    |                      |                     |                     |             |           |               |           |       |
|   |                |                    |                      |                     |                     |             |           | Pos           | st Code : |       |
| Correspondence  | e Address :    |                    |                      |                     |                     |             |           | Pos           | st Code : |       |
| Contact Number  | rs : (H)       |                    |                      | (0)                 |                     |             | (M)       |               |           |       |
| Marital Status :  | Single         |                    | Married              |                     | Divorced            |             |           | Wid           | dowed     |       |
| Gender:   |                | Male               |                      |                     |                     | Female      |           |               |           |       |
| I/C Number :  |                |                    |                      | Colour:             |                     |             |           |               |           |       |
| Nationality:  |                | R                  | lace:                |                     |                     | Religion    | :         |               |           |       |
| LANGUAGE PROFICIENCY (Excellent / Good / Fair)  |                |                    |                      |                     |                     |             |           |               |           |       |
| Language  |                |                    |                      | Spoken              |                     |             |           | Writte        | en        |       |
|   |                |                    |                      |                     |                     |             |           |               |           |       |
|   |                |                    |                      |                     |                     |             |           |               |           |       |
|   |                |                    |                      |                     |                     |             |           |               |           |       |
| EDUCATION   | N (Please prov | vide copies of rel | evant certificates)  |                     |                     |             |           |               |           |       |
| From  | То             | Education Titl     | le                   |                     | Results             | ı           | Inst      | titution/Scho | ol/Unive  | rsity |
|   |                |                    |                      |                     |                     |             |           |               |           |       |
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| ACHIEVEMENT (related to working experience only) (Please provide certificate evidence for each achievement) |                |                    |                      |                     |                     |             |           |               |           |       |
| Date  | Descr          |                    | chence only) (Ficuse | provide certificati | e evidence for each | ar demevem  | circy     |               |           |       |
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| WORKING HISTORY (Please list the last three employment history) (Please provide copies of employer's testimonial if any) |  |     |  |                     |  |  |  |  |
|--|--|-----|--|---------------------|--|--|--|--|
| Please indicate the Company name, position, period, reason for leaving & responsibilities.                               |  |     |  |                     |  |  |  |  |
| Company Name :   |  |     |  | Position:           |  |  |  |  |
| Period :   |  | To: |  | Reason for Leaving: |  |  |  |  |
| Brief Responsibilities :   |  |     |  |                     |  |  |  |  |
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| Company Name :   |  |     |  | Position:           |  |  |  |  |
| Period :   |  | To: |  | Reason for Leaving: |  |  |  |  |
| Brief Responsibilities :   |  |     |  |                     |  |  |  |  |
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| Company Name :   |  |     |  | Position :          |  |  |  |  |
| Period :   |  | To: |  | Reason for Leaving: |  |  |  |  |
| Brief Responsibilities :   |  |     |  |                     |  |  |  |  |
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| TRAINING/COURSES ATTENDED (Please provide certificate evidence of training/courses attended) |                            |       |     |             |  |  |  |  |
|--|----------------------------|-------|-----|-------------|--|--|--|--|
| Course Title   | Training provider/Location | Start | End | Expiry Date |  |  |  |  |
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| REFERENC   | ES (Please list at least two non-family mo | embers o | r friends) |               |     |  |  |
|--|--|----------|------------|---------------|-----|--|--|
| Full Name :  |  |          |            | Relationship: |     |  |  |
| Position:  |  |          | Company :  |               |     |  |  |
| Contact Number   | r:   | (H)      |            | (O)           | (M) |  |  |
| Full Name :  |  |          |            | Relationship: |     |  |  |
| Position:  |  |          | Company :  |               |     |  |  |
| Contact Number   | r:   | (H)      |            | (0)           | (M) |  |  |
| Full Name :  |  |          |            | Relationship: |     |  |  |
| Position:  |  |          | Company :  |               |     |  |  |
| Contact Number   | r:   | (H)      |            | (0)           | (M) |  |  |
| ACKNOWL  | EDGEMENT & SIGNATURE                       |          |            |               |     |  |  |
|  |  |          |            |               |     |  |  |
| I acknowledge that all the above stated information is true. |  |          |            |               |     |  |  |
| 2 deministración   |  |          |            |               |     |  |  |
|  |  |          |            |               |     |  |  |
| Signature :  |  |          |            | Date :        |     |  |  |

Why do you want to work for Brunei Methanol Company Sdn. Bhd.? Please give your answers in not more than 20 words.

**QUESTIONNAIRE** 

HR/JA/02/09

## **BRUNEI METHANOL COMPANY SDN. BHD.**

Sungai Liang Industrial Park (SPARK) Kg Sungai Liang Daerah Belait KC 1135 Negara Brunei Darussalam

Tel No: +673 3229300 Fax No: +673 3230890 E-mail: recruitment@brunei-methanol.com Website: www.brunei-methanol.com

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