

CONFIDENTIAL

APPLICATION FOR EMPLOYMENT FORM

POSITION APPLIED FOR

PERSONAL PARTICULARS

Full Name (as in NRIC or Passport) <i>Please underline surname</i>		* Dr / Rev / Mr / Mdm / Miss	
Address		Contact Numbers (Home)	(Mobile)
Postal Code ()		Email Address	
Country of Birth		Citizenship	

ACADEMIC QUALIFICATIONS / TRAINING

Date		School / College / University / Institution Attended	Highest Qualification Attained	Course / Major
From	To			

Other Qualifications / Courses Attended / Awards Attained

Date		Awarding Institution	Qualifications / Awards Attained
From	To		

Professional Membership

Name of Institute	Country	Membership Type	Member Since

Knowledge of Computer Software		Language Proficiency	
1.	3.	Written	Spoken
2.	4.		

EMPLOYMENT HISTORY

Begin with present / most recent employer

Date		Company Name	Position Held	Last Drawn Salary
From	To			
Key Responsibilities				Reason for Leaving

Previous Employers

Date		Company Name	Position Held	Reason for Leaving
From	To			

OTHER INFORMATION

Please answer the following questions:

1. Have you been in the employment of Trinity Christian Centre before?
2. Do you have any relative presently in the employment of Trinity Christian Centre?
3. If you have answered 'Yes' to any of the questions above, please give details:

Minimum Expected Salary	Notice Period Required	Earliest Date Available (if offered appointment)
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REFEREES

Please give details of two referees whom we may approach for references.

Name	Company Name	Occupation	Contact Number	Years Known

DECLARATION

- I declare that the information in this application for employment and any sheets attached hereto are true to the best of my knowledge and I have not wilfully suppressed any material fact. I accept that if any of the information given by me in this application is in any way false or incorrect, I may be disqualified from employment or dismissed from service.

- I hereby consent to the collection, use, disclosure, and retention of my personal data in accordance with the terms of Trinity's privacy policy (<https://chms.trinity.sg/privacy-policy>). By providing my contact details, I agree that Trinity and any of your representatives may contact me on any matters relating to Trinity.

Signature of Applicant

Date