



## JOB APPLICATION FORM

Doc No: HRM-MY-009D

Rev: 02

Date: 10-02-2024

School: \_\_\_\_\_

Position applied for: \_\_\_\_\_

Photo

Name of Applicant: \_\_\_\_\_ Gender: \_\_\_\_\_  
(IN BLOCK LETTERS) (FULL NAME AS PER NRIC/ PASSPORT)

Date of Birth: \_\_\_\_\_ Place of Birth (Country): \_\_\_\_\_ Marital Status: \_\_\_\_\_

No. of Children: \_\_\_\_\_ NRIC No. / Passport No.: \_\_\_\_\_ Nationality: \_\_\_\_\_

Address: \_\_\_\_\_

Contact No. (Residential): \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Current Salary (+Fixed Allowances): \_\_\_\_\_ Expected Gross Salary: \_\_\_\_\_ Notice Period: \_\_\_\_\_

### EDUCATIONAL QUALIFICATION

	Name of Institution	Name of Examination	Level Achieved	Year Completed
1				
2				
3				
4				

### CURRENT & PREVIOUS JOBS HELD

	Company Name	Contact Number	From (MM/YY) – To (MM/YY)	Position Title	Salary Drawn	Reason for Leaving
1						
2						
3						
4						

### EXTRA CURRICULAR ACTIVITIES

	Name of Institution	Type of Activity
1		
2		
3		
4		

**LANGUAGES (Level: Excellent, Good, Average, Basic)**

	Name of Language	Oral Skills	Writing Skills
1			
2			
3			
4			
5			

**What specific skills and abilities do you believe make you suitable for the position that you are applying for?**

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**Please provide the names and contact details of professional referees whom we may contact to attest to your work character and work-related qualities**

	Name of Referee & Job Position	Company Name	Email Address	Phone Contact	Relationship with Referee
1					
2					
3					

**BACKGROUND CHECK**

I hereby give consent to BEACONHOUSE MALAYSIA SDN BHD and/or any of their appointed representatives to conduct a full background check for the purpose of my job application with the Company and I fully understand that all outcomes from the background check will solely be used to facilitate my job application and it shall not be used for other purposes.

**DECLARATION**

I have physical disabilities and handicaps. If yes, please state: \_\_\_\_\_

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

I suffer from major illnesses, drug or alcohol addiction.

<input type="checkbox"/>	<input type="checkbox"/>
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I have been hospitalized or have suffered injuries due to accident(s).

<input type="checkbox"/>	<input type="checkbox"/>
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I have been convicted of a criminal offence, or a crime which bars me from working with children or that would result in me being blacklisted by the Ministry of Education.

<input type="checkbox"/>	<input type="checkbox"/>
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I have been/am a bankrupt.

<input type="checkbox"/>	<input type="checkbox"/>
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**APPLICANT'S DECLARATION**

I hereby declare that the information provided by me in this Job Application Form is accurate, true and no pertinent details have been withheld. If any information provided is subsequently found to be incorrect, incomplete or untrue, the Company reserves the rights to terminate my employment without notice or compensation. I shall not hold the Company responsible for any untoward consequences arising from any information not provided herewith.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of applicant



## AUTHORIZATION FOR RELEASE OF INFORMATION FOR EMPLOYMENT PURPOSES

### Background Screening Disclosure

I hereby authorize Verity Intelligence Sdn Bhd and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or a background check report on "Criminal / Local Integrity Check" and/or "Global Integrity Check" and/or ID Check to be generated. I understand that the scope of the report/background check report may include the following areas: names and dates of previous/current employment, work experience, workers compensation/claims, criminal history records (from local, state, federal, international and other law enforcement agencies' records).

### Authorization and Release

I, \_\_\_\_\_, authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation, or public agency may have. I authorize the full release of the information described above, without any reservation. I hereby release Verity Intelligence Sdn Bhd, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at any time, result to me, my heirs, family or associates because of compliance with this authorization for release form. Any false statements provided in this form and my resume will be considered just cause for the termination of employment at any time. This authorization and consent shall be valid in original, fax, or copy form.

The following information is required by law enforcement agencies and other entities for identification purposes when checking records from "Criminal / Local Integrity Check". It is confidential and will not be used for any other purpose.

Applicant's Name: \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_ Mobile Phone

ID /Passport Number: \_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (Month/Day/Year)  
Date of Birth (This will not affect hiring decision)

Current Address: \_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of or pleaded no contest to a felony/crime?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

Date: \_\_\_\_\_