

BOULEVARD IT SUPERSTORE SDN. BHD. (528942-D)

LOT 2173, 2nd FLOOR, SABERKAS COMMERCIAL CENTRE, JALAN PUJUT – LUTONG, 98000 MIRI, SARAWAK.
 TEL: 6085-665223 Fax: 6085-665227

EMPLOYMENT APPLICATION FORM

Passport-sized photo

IMPORTANT : This form should be FULLY COMPLETED. Copies of testimonials/ certificates pertaining to your education and previous experience of employment must be attached with this application. Do not attach the original copies of your certificate.

Branch : Boulevard SF1.3 Miri Gadget Bintang Mega Mall DSS Boulevard
 Saberkas Kuching HQ Imperial Mall DSS Miri
 K.Karamunsing Delta The Spring Others: _____

Position applied : _____

How did you come to know about this profession? (Please tick ✓)

Family Friend Advertisement Employment Agency Walk-in Others _____

1 PERSONAL PARTICULARS

Name (As per I.C.)		Chinese Characters (If applicable)	
Residential Address	Contact No.	Home	
		Office	
		H/P	
Postal Address	NRIC No.(New)		NRIC No.(Old)
	Date/ Place of Birth		Race
	Nationality		Religion
Do you have own transport? If yes please specify, transport type)		Driving License Class	
EPF No.:	Socso No.:		Tax No.:
Marital Status (Please tick) <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widow <input type="checkbox"/> Widower			No. of Kids (If Married)

A. EDUCATIONAL BACKGROUND

Name of School/ College/ University/ Professional Institutions	Duration		Highest Qualification	Grade
	From	To		

Private & Confidential

B. CURRENT ACTIVITIES

(Professional Club/ Association Attended)

Name Of Club/ Society Association etc	Date Joined	Description of Activities	Position Held

C. SUPPLEMENTARY COURSE/ TRAINING ATTENDED

Name of Course	Duration		Conducted by
	From	To	

2 FAMILY PARTICULARS

List out below : Parents, brothers, sisters, spouse & children.

Name	Age	Relationship	Occupation	Employer Name

3 EMPLOYMENT HISTORY

1. Company Name	Period	Phone No.
Position	Location	Last Drawn Salary
Responsibilities		
Reason(s) for Leaving		

2. Company Name	Period	Phone No.
Position	Location	Last Drawn Salary
Responsibilities		
Reason(s) for Leaving		

Private & Confidential

3. Company Name	Period	Phone No.
Position	Location	Last Drawn Salary
Responsibilities		
Reason(s) for Leaving		

4 GENERAL INFORMATION

(Please indicate Good, Fair, Poor)

Language	English	B. M'sia	Tamil	Mandarin	Others
Written					
Spoken					

PC Knowledge: Wordstar/ Multimate/ Wordperfect/ Lotus 123/ Symphony/ Dbase/ Others (Please specify _____)

5 OTHER INFORMATIONDo you suffer from any physical/ mental disability/ impairment? Yes/ No
If yes, please give details _____Have you ever been seriously ill? Yes/ No
If yes, state illness, date and doctor in attendance _____

Are you solely dependent on your employment for your livelihood? Yes/ No

Have you any other sources of income? Yes/ No
If yes, please give details _____Have you ever been convicted in a court of law in any country? Yes/ No
If yes, please give details _____Are you now in debt? Yes/ No
If yes, please give details _____Have you ever taken or do you take drugs or narcotics? Yes/ No
If yes, please give details _____Do you smoke? Yes/ No
If yes, please indicate daily consumptions _____Do you have any relatives or friends currently employed by this Company? Yes/ No
If yes, please give their names and department _____Are you currently pregnant? (For female staff only) Yes/ No
If yes, please provide month(s) of conceiving _____What sports, games and hobbies do you participate in from time to time?
_____**6 REFEREES**

List out below names of 2 referees whom we may contact when the need arises. (Referees should not be relatives)

Name	Address	Tel No.	Occupation	No. of Years Known

7 AVAILABILITY

Minimum basic salary required to accept this position : RM _____ per month

Notice period required to present employer : _____ indicate week(s) or month(s)

8 DECLARATION

I _____ IC No. _____ do hereby declare that all the information given herein are true and correct. I further confirm that I shall not enter into any other Company that related with the same business during my employment with Boulevard Computer & Telecommunication. I understand that a misrepresentation/ false declaration or omission of facts will be sufficient cause for cancellation of consideration for employment or dismissal from the Company's service if I have been employed.

Signature : _____

Date : _____

RECOMMENDATIONS BY DEPARTMENTAL REPRESENTATIVE (S) :

REVIEWED BY: _____
(DEPARTMENTAL HEAD)

Date : _____

FOR HUMAN RESOURCES DEPARTMENT USE ONLY

POSITION OFFERED :		BASIC SALARY :	
COMMENCE DATE :		DEPARTMENT :	
APPROVED BY :		DATE :	
OTHER REMARKS (IF ANY)			
REPLACEMENT		TEMPORARY	
NEW POSITION		REQUISITION DATED	
		APPROVED BY	