**PRE-EMPLOYMENT FORM**

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| --- |
| **Date:** |
| **Name of Applicant:** |
| **I/C Number:** |
| **Contact Number:** |
| **Email Address:** |
| **Home Address:** |
| **Postal Address:** |

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| --- | --- | --- | --- |
| **No** | **Questions** | **Y or N** | **Please give your feedbacks** |
| 1 | **Personal Details** |  |  |
|  | Marital Status |  |  |
|  | How many kids do you have? |  |  |
|  | How old your kids? |  |  |
|  |  |  |  |
| 2 | **English knowledge : 1 lowers – 10 highest** |  |  |
|  | Speaking (rate 1 to 10) |  |  |
|  | Writing (rate 1 to 10) |  |  |
|  |  |  |  |
| 3 | **Work Ethics** |  |  |
|  | Are you a team player? (e.g. Are you willing to help you team member to complete a task if you are available?) |  |  |
|  | Are you willing to work overtime? |  |  |
|  | Are you willing to standby during weekends (Saturdays & Sundays) and Public Holidays? |  |  |
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| 4 | **Criminal Record** |  |  |
|  | Have you committed any crime and convicted before? |  |  |
|  | Have you have any previous criminal police record? |  |  |
|  |  |  |  |
| 5 | **Financial Status** |  |  |
|  | Do you owe any study loan, car loan, credit card loan or other personal loan? How much is your debt or liability? To which financial institutions or individual do you owe these loans? |  |  |
|  |  |  |  |
| 6 | **Acceptance of Offer** |  |  |
|  | When can you join us? (Please specify the date in ddmmyyyy) |  |  |
|  | How many days of advance notice do you need to inform your current employer before you can leave your current job? (Please specify in number of days) |  |  |
| 7 | **Current & Expected Salary** |  |  |
|  | What is your current salary in Ringgit? |  |  |
|  | What is your expected salary in Ringgit? |  |  |
|  |  |  |  |
| 8 | **Health Status** |  |  |
|  | Do you have any health issue (that may prevent you from carry out the job efficiently) that you want to declare? (Examples ; Cancer, Diabetes, or etc) |  |  |
|  | Do you have any abnormal metal & physical conditions that may prevent you from carry out the job efficiently that you want to declare? E.g. poor eye sight |  |  |
|  | Are you taking any illegal drug or abuse yourself with illegal drug? |  |  |
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| 9 | **Driving License and Transport** |  |  |
|  | Do you have valid driving license and own transport (Car or Motorbike) |  |  |
| 10 | **Attendance Records** |  |  |
|  | How many days of Emergency Leave (EL) and Medical Leave (MC) you have taken for last year and current year  Note: Apply less than 24 hours  Emergency Leave (EL)   1. Last Year 2. Current Year   Medical Leave (MC)   1. Last Year 2. Current Year |  |  |
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| **Others – Comment(s) & Feedback(s)** |
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**Applicant Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**