

APPLICATION FOR EMPLOYMENT

Recently Taken Passport Photo

Position applied for:		
PERSONAL INFORMATION		
Name: (Mr/Ms/Mrs):		
Gender: Female Male	NID Card No:	Marital Status:
Date of Birth:	Place of Birth	
Current Address:		
Permanent Address:		
Email:	Mobile:	Telephone:
Do you have any family members or friends	working in Allied Insurance C	company?
Yes No		
If yes, specify:		
Do you have any personal responsibilities the work competency (i.e. defects in hearing, vi		tending work or health problems that may hinder
Yes No		
If yes, specify:		
Have you completed 2 doses of Covid-19 vac	ccine?	
Yes No		
If yes, specify the date 2nd dose of Covid-19	ovaccine was administered:	
If no, specify:		
The reason for not getting vaccinated:		
The earliest expected date to get vaccir	nated:	



EDUCATION

GCE O' LEVEL			GCE A' LEVEL			
Subject (s)	Grade	Year	Subject (s)		Grade	Year
COLLEGE/UNIVERSITY						
Institution & Location	1	Major / Subjects	of Study	Level of Studies		Year
			RAINING, ETC.			
Institution & Location		Training Progra	m Name	Duration		Year

PREVIOUS EXPERIENCE

Please list beginning from most recent					
Dates Employed	Company Name	Role / Title	Reason for leaving		
Job tasks performe	d:				
Dates Employed	Company Name	Role / Title	Reason for leaving		
Job tasks performe	d:	<u>i</u>	ii		
PRIOR CONVICTION	18				
Have you ever been c	onvicted of any violation of law?				
Yes No					
If Yes, then please provide the following:					
Date of charge:	Date of conv	iction:			
Describe the offense	:				



REFERENCES

Full Name	Address	Contact No.	Relationship			
May we contact your present or last employer?						
Yes No						
When will you be available to start work?						
IOB APPLICATION CERTIFICATION						
I hereby certify that all entries on this job application and any attachments are true and complete. I also agree and understand that any falsification in this information may result in forfeiture of my prospective employment.						
I understand that all information of this job application to verification and I consent to criminal history and background checks. I also agree that you may contact references and educational institutions listed on this application.						
Signature:	Date:					
DOCUMENTS REQUIRED WITH THE APPLICATION						
Job letter	Education Certificat	es (Attested/Verified by a G	overnment Office)			
National ID Card copy/Passport copy	Reference Letters or	other supporting d	ocuments			