



TAP
Menjana Masyarakat Berhemat

PLEASE
ADD
PHOTO

APPLICATION FORM

Position(s) applied for	1)
	2)
Name	

REQUIREMENTS

Documents to be attached with this Application Form:

1. Copy of Identity Card
2. Birth Certificate
3. Certificates of Academic Achievements, including professional qualifications

DECLARATION

1. I hereby certify that all information I have provided in this Application Form are true and accurate. Should verification if required on the said information; I hereby authorize Tabung Amanah Pekerja to carry out the necessary investigations.
2. I acknowledge that the submission of this Application Form to Tabung Amanah Pekerja does not amount to a guarantee of an employment with the Organization.
3. I further acknowledge that any inaccuracy or omission of information called for in this Application Form shall amount to misrepresentation and if I am subsequently employed by Tabung Amanah Pekerja, the Organization may in its sole discretion terminate my contract of employment.

Signature	Date
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PERSONAL PARTICULARS

Name			
Gender	Male / Female	Marital Status	
I.C. Number		Colour	Yellow / Red Others:
Age		Date of Birth	/ /
Citizenship			
Race		Religion	

Address			
Postcode			

Contact Details	
Home	
Mobile	
Work (if any)	
e-Mail Address	

QUALIFICATIONS

EDUCATION	RESULT	NAME OF INSTITUTION	YEAR ATTENDED	
			FROM	TO
BGCE 'O' LEVEL				
BGCE 'A' LEVEL				
Others (Certificate, OND/ND, HND, Degree, Master, Doctorate, etc)	RESULT	NAME OF INSTITUTION	YEAR ATTENDED FROM	TO

WORKING EXPERIENCE

Please list down the last two employments

Name of Employer / Company	Name of last Supervisor	Employment Dates	Pay or Salary
		From To	Start Final
Last job title:		Reason for Leaving:	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of Employer / Company	Name of last Supervisor	Employment Dates	Pay or Salary
		From To	Start Final
Last job title:		Reason for Leaving:	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

REFEREES

Please list three references other than relatives

Referee 1 (If Government employee: Head of Department)

Name			
Address			
Contact Number	(Work)		
	(Mobile)		
E-Mail Address			

Referee 2 (Others)

Name		
Address		
Contact Number	(Work)	
	(Mobile)	
E-Mail Address		

Referee 3 (Others)

Name		
Address		
Contact Number	(Work)	
	(Mobile)	
E-Mail Address		

GENERAL INFORMATION

What are your hobbies?

What technical skills and knowledge areas are your strength?

What are your key strengths?

What are your weaknesses?

Spoken Language

Malay	<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Fluent
English	<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Fluent
Others:	<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Fluent

Written Language			
Malay	<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Fluent
English	<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Fluent
Others:	<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Fluent

What management approach are most effective in maximizing your performance? (tick one of each)	
<input type="checkbox"/> Close supervision & control	<input type="checkbox"/> Loose supervision & control
<input type="checkbox"/> Regulatory schedules contact & communication	<input type="checkbox"/> Regulatory schedules contact & communication
<input type="checkbox"/> Verbal recognition	<input type="checkbox"/> Monetary reward & recognition
<input type="checkbox"/> Mostly individual projects	<input type="checkbox"/> Mostly team projects
<input type="checkbox"/> Opportunities to lead	<input type="checkbox"/> Flexibility to follow others
<input type="checkbox"/> Provided with varied tasks	<input type="checkbox"/> Allowed to focus on the same task each day
<input type="checkbox"/> Volume of the output being most important	<input type="checkbox"/> Quality of the output being most important

What other organization have you applied recently?	
Minimum starting monthly salary accepted?	B\$
Employment preference?	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time <input type="checkbox"/> Any
Number of days able to report to work?	Days <input type="checkbox"/> Immediately

SKILLS

Please rate your skill level in each area from 1 to 5 (5 = Highly Skilled, 1 = No Experience)

Communication & Work Style	Rating	Microsoft Office – Words	Rating
Talking to clients		Create/Save/Revise a document	
Multi-tasking		Adjust margins & fonts	
Taking initiative		Spell & grammar check	
Taking direction		Create labels / envelopes	
Attention to detail		Microsoft Office – Excels	
Working in teams		Create/Save/Revise a spreadsheet	
Working alone		Adjust cell properties	
Following processes and procedures		Create formulas	
Neat, professional image		Create macros	
Legible handwriting		Create multiple spreadsheets	
Working neatly		Link spreadsheets/worksheets	
Letter composition		Microsoft Office – Access	
Filing		Create/Save/Revise a database	
Mail handling		Create queries	
Scheduling		Microsoft Office – Publisher	
Plan & organize activities		Create/Save/Revise a file	
Internet		Work with photos and graphics	
Research		Microsoft Office – Powerpoint	
Map search		Create/Save/Revise a slide	
Reverse look-ups		Design layout	