

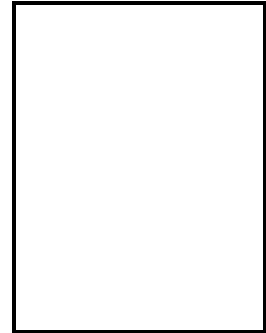


# QOHS FORMAT

## SISTEM INTEGRA SDN. BHD.

Doc: F-QOHS-19	Rev: 0	Date: 31-JULY-2022	Prepared by: HON ZHIJIE	Page 1 of 3
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TITLE: EMPLOYEE APPLICATION FORM



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 Bandar Seri Begawan, BE1118  
 Negara Brunei Darussalam  
 Gadong P.O. Box 821, Bandar Seri Begawan BE3978,  
 Negara Brunei Darussalam  
 Tel No: (673) 2428208 | Fax No: (673) 2428210

Position Applied For / Jawatan Dipohonkan : \_\_\_\_\_

### Section A : PERSONAL / DATA PERIBADA

(Please attach photocopy of identity card / Sila sertakan salinan kad pengenalan)

Name / Nama : \_\_\_\_\_

Present Address / Alamat semasa : \_\_\_\_\_

Permanent Address / Alamat tetap (if different from above) : \_\_\_\_\_

Contact Number (Mobile) / nombor telefon : \_\_\_\_\_ Age / Umur : \_\_\_\_\_

Email Address / Alamat emel : \_\_\_\_\_ Sex / Jantina : \_\_\_\_\_

IC Number / Nombor IC : \_\_\_\_\_ IC Colour / Warna IC : \_\_\_\_\_

Citizenship / Kerakyatan : \_\_\_\_\_ Race / Bangsa : \_\_\_\_\_

Passport no / Nombor pasport : \_\_\_\_\_ Place of issue / Tempat dikeluarkan : \_\_\_\_\_

Date of issue / Tarikh dikeluarkan : \_\_\_\_\_ Date of expiry / Tarikh mansuh : \_\_\_\_\_

Marital status / Taraf perkahwinan : Single / Bujang Married / Kahwin Divorced / Cerai

Height / Tinggi : \_\_\_\_\_

Weight / Berat : \_\_\_\_\_

#### Family Information / Maklumat keluarga :

Name / Nama	Relationship / Hubungan	Age / Umur	Occupation / Perkerjaan

Emergency Contact / Orang hubungan kecemasan : \_\_\_\_\_  
 Contact Number / nombor telefon : \_\_\_\_\_

**Section B : EDUCATIONAL QUALIFICATIONS / KELULUSAN PELAJARAN**

(In chronological order) \*Please include a copy of school transcript / (Dari permulaan sekolah) \*Sila sertakan salinan sikil persekolahan

Certificate / Diploma <i>Sijil Diperolehi</i>	School / University <i>Sekolah / Universiti</i>	From (MM/YY) <i>Dari</i>	To (MM/YY) <i>Hingga</i>	Result of Exam <i>Keputusan peperiksaan</i>

**OTHER QUALIFICATIONS / LAIN-LAIN KELULUSAN**

**COURSES** ( Attended / *Dijalani* or Presently attending / *Masih dijalani*)

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**Section C : PREVIOUS EMPLOYMENT AND EXPERIENCE / PEKERJAAN DAN PENGALAMAN TERDAHULU**

List chronologically starting from the most recent / *Senaraikan mengikut kronologi bermula daripada yang terkini.*

Please include a copy of CV / *Sila sertakan salinan CV*

Name of Company <i>Nama Majikan</i>	Position <i>Jawatan</i>	Salary <i>Gaji</i>	From (MM/YY) <i>Dari</i>	To (MM/YY) <i>Hingga</i>	Reason for Leaving <i>Sebab Erhenti</i>

**REFEREES / REFERI**

(Name two persons not related to you / *Namakan dua orang yang tidak mempunyai hubungan keluarga.* )

Name / <i>Nama</i>	Occupation / <i>Perkerjaan</i>	Years known / <i>Tahun kenal</i>	Contact information / <i>Maklumat perhubungan</i>

**LANGUAGE & DIALECTS / Bahasa pertuturan :**

Written & Spoken /*Menulis & Bertutur*

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Spoken Only /  
*Bertutur Sahaia*

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**ACTIVITIES / Aktiviti**

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*Hobbies & Interests /  
Keamaran & Minat*

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**Section D : OTHER INFORMATION / LAIN-LAIN KETERANGAN**

**HAVE YOU / ADAKAH ANDA** (If Yes, give details / Jika Ya, beri keterangan )

1. Any physical disabilities or are handicapped? / Adakah anda cacat anggota?

Yes/ Ya. No/ Tidak \_\_\_\_\_

2. Suffered from any chronic illness/drug addictions? Adakah anda menghidapi sebarang penyakit penyakit/ketagih dadah?

Yes/ Ya. No/ Tidak \_\_\_\_\_

3. Any friends or relatives working in this company or its subsidiaries? Adakah anda mempunyai kawan atau saudara mara yang bekerja dimana-mana anak buah syarikat ini?

Yes /Ya. No/ Tidak \_\_\_\_\_

4. Ever been convicted of a criminal offence ?/ Pernahkah anda didakwa dalam kes jenayah ?

Yes / Ya. No / Tidak \_\_\_\_\_

5. Are you a director of any private or public limited company or partner in any partnership? Adakah anda seorang pengarah dimana-mana anak buah syarikat swasta atau menjadi rakan kongsi perniagaan?

Yes /Ya. No / Tidak \_\_\_\_\_

6. Do you own a vehicle? /Adakah anda mempunyai kenderaan sendiri?

Yes / Ya. No /Tidak \_\_\_\_\_

Driver's Licence No: \_\_\_\_\_

Nombor lesen memandu \_\_\_\_\_

7. Driving class / Kelas memandu 1 2 3 4 5 6 7 8 9 10 11 12

Vehicle registration no.: \_\_\_\_\_

Type /Jenis: \_\_\_\_\_

**Section E : Candidate's own assessment of strengths and weaknesses**

*Penilaian calon sendiri terhadap kekuatan dan kelemahan*

<b>Strengths / Kekuatan</b>	<b>Weaknesses / Kelemahan</b>

**I declare that all information given above is correct and true. I understand that any false information given may render me**

Signature /Tandatangan \_\_\_\_\_

Date /Tarikh \_\_\_\_\_