



**The Muslim Converts' Association of Singapore
(Darul Arqam Singapore)**

32 Onan Road The Galaxy Singapore 424484
Tel: (65) 6348 8344 Fax: (65) 6440 6724

APPLICATION FOR EMPLOYMENT

POST(S) APPLIED FOR :		Recent Photograph of Applicant	
Expected salary if offered appointment :			
Earliest date available if offered appointment :			
PERSONAL PARTICULARS			
Full Name (Mr/Mrs/Mdm/Miss)			
Home Address		Home Tel : Office Tel : Pager No :	
Postal Address (if different from home address indicated above)		Handphone No : Fax No : E-mail :	
Citizenship	Country of Birth	Date of Birth / Age	
Identity Card No: Place of issue: Colour : Pink / Blue Type : Singapore / Malaysia	Please indicate whether Permanent Resident of Singapore <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state Entry Permit No.	Passport (Not applicable to Singaporeans, Malaysians/Singapore Permanent Residents) No: Place of Issue:	
Marital Status (Please tick ✓ where appropriate) <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
		Ethnic Group	
		Religion	
EDUCATION (List schools/institutions/universities attended. Please attach relevant copies of certificates/transcripts)			
From	To	Schools/Institutions/Universities attended	Highest Standard Passed

Other qualifications relevant to the position you are applying for

Qualifications	Date obtained	Awarding Institution

If you are at present attending course(s) and have yet to sit for any examination, give details of course/examination; Institution; date of examination:

Languages (Please state languages and proficiency level i.e. excellent, good, fair, poor.)

Written :

Spoken :

Do you have any relative or friend presently working in the Association? Yes / No
 Do you have any relative or friend presently [who is in the](#) Executive Committee or Council of the Association? Yes / No
 If yes, please give details below

Name	Appointment	Department	Relationship

EMPLOYMENT HISTORY

A. Present Appointment

Post	Date Joined
Name of Organisation / Employer	Gross monthly salary
Address of Organisation / Employer	Reason for intended change of employment

Previous Appointments (Please list in chronological order)

Date of Joining		Date of Leaving		Position Held	Organisation's / Employer's Name and Address	Last Drawn Gross Salary
Month	Year	Month	Year			
Reason for Leaving						
Reason for Leaving						
Reason for Leaving						

May we write to the following for a reference?

(a) Your present employer Yes No

(b) Your previous employer(s) Yes No

Character Referees (Name 2 persons who are not your relatives)

Name	Occupation	Years known	Address

NATIONAL SERVICE LIABILITY

Liable / due on : _____ / _____ Vocation : _____ Rank Held : _____
 Exempted

OTHER INFORMATION

Family background (please give details of your family members: spouse, children and parents)

Relationship	Full Name	Date & Place of Birth	Citizenship	Occupation

Please answer the following questions. If the answer is 'Yes', give details on a separate sheet of paper.

- Do you have a criminal record? Yes / No
 - Have you ever been dismissed, discharged or suspended from employment? Yes / No
 - Have you ever had, or are you suffering from any
 - physical impairment? Yes / No
 - disease? Yes / No
 - mental illness? Yes / No
 - medical condition? Yes / No
 - Have you ever submitted an application to the Association for an appointment before? Yes / No
- If Yes – Previously Applied Position _____ Date of Application: _____

DECLARATION

I declare that the information given above is complete, true and accurate. Any false particulars or suppression of materials facts will render me liable to disqualification and if appointed, to dismissal without notice from the Association.

_____ Signature of Applicant

_____ Date

Notes:

- Please complete all fields
- Delete whichever is not applicable

FOR OFFICIAL USE

Interviewer's Comments and Remarks:

Applicant : Suitable / Not Suitable*

Applicant to replace : _____ / fill a new position _____

Category : Executive / Non – Executive*

Starting Salary : _____ Date of Commencement : _____

Name of Interviewer

Signature

