

WARINGIN HOSPITALITY

EMPLOYEE APPLICATION FORM

POSITION APPLIED	VACANCY SOURCE

PERSONAL DATA

Full Name	Age	Place & Date of Birth	Material Status	Sex	Nationality

CONTACT INFORMATION

Address		
Telephone Number	Home :	Mobile :
E-mail Address		

LANGUAGE ABILITY

Mother Tongue						
Other Languages						
1	<input type="checkbox"/> Read	Fair / Good / Fluent	<input type="checkbox"/> Write	Fair / Good / Fluent	<input type="checkbox"/> Speak	Fair / Good / Fluent
2	<input type="checkbox"/> Read	Fair / Good / Fluent	<input type="checkbox"/> Write	Fair / Good / Fluent	<input type="checkbox"/> Speak	Fair / Good / Fluent
3	<input type="checkbox"/> Read	Fair / Good / Fluent	<input type="checkbox"/> Write	Fair / Good / Fluent	<input type="checkbox"/> Speak	Fair / Good / Fluent

FORMAL EDUCATION

Name and Place of School/Institute	Degree / Diploma	Years Attended		GPA
		From	To	

INFORMAL EDUCATION (TRAINING/COURSES/SEMINAR/LICENCE/Starting from the most recent one)

Institution	Major	Period		GPA
		From	To	

FAMILY BACKGROUND (Entire family including self for single employee, spouse and children for married employee)

NAMA	Relation	Age	Occupation / Location

MOBILITY

Driving Licence			
Transportation			
Avallability To Work	Out Of Town	<input type="checkbox"/> Yes	<input type="checkbox"/> No Reason :
	Overseas	<input type="checkbox"/> Yes	<input type="checkbox"/> No Reason :

WORKING EXPERIENCE

(Starting from the most recent one)

Company Name	Position	Periode	Main Duties
	Reason For Leaving		
	Salary		
	Reason For Leaving		
	Salary		
	Reason For Leaving		
	Salary		
	Reason For Leaving		
	Salary		

EXPECTED SALARY

Basic	: Rp.	Other Benefit :
Allowance	: Rp.	
Total Take Home Pay Salary	: Rp.	

ADDITIONAL SKILLS

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YOUR WISHES / EXPECTATION TOWARDS YOUR NEW JOB

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- | | |
|--|--|
| Notice Period Required by current employer | |
|--|--|
- | | |
|--|--|
| Earliest date available to commence work | |
|--|--|

I Certify that the above statements are true and complete to the best of my knowledge

Date

Signature

<u>INTERVIEWER COMMENTS</u>	<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected	DATE	SIGNATURE