



Photo

Employment Application Form

Full Legal Name _____

Surname

Other Names

Other Name(s) by which known _____

Current Address _____

Telephone No. _____ Cellular No. _____ Email Address _____

Date of Birth _____ Country of Birth _____ Citizenship _____

ID Card No. _____ Expiry Date _____

Passport No. _____ Expiry Date _____ NIS No. _____

Driver's Permit No. _____ Expiry Date _____ BIR No. _____

Bank _____ Branch _____ Account No. _____

Sex M F Marital Status Single Married CommonLaw

Separated Divorced Widowed

Number of Children _____

| | Ages on last birthday | | | | Number of other dependants |
|---------|-----------------------|--|--|--|----------------------------|
| Males | | | | | |
| Females | | | | | |

Do you have any Medical Problems? Yes No If Yes, please give full details below

Are you related to any Employee of this Company? Yes No

If Yes, please state your relative's name and the relationship _____

Name and address of Next of Kin (in case of an emergency) _____

_____ Telephone Number _____

Have you worked for Rotoplastics or any of its subsidiary Companies before? Yes No

If Yes, please state Department and Position _____

Position(s) applying for: 1. _____ 2. _____

Date you can begin _____ Salary Desired _____

Why are you interested in becoming an employee with this Company?

Employment Sought: Full Time Part Time

EDUCATION - List most recent first

| | Name & Address of School or Institution | Years Completed | Highest Level Attained | Certificates or Pass Grades Obtained |
|--|---|-----------------|------------------------|--------------------------------------|
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What are your career goals?

Give a brief description of your skills _____

Where did you get the information about the position? _____

EMPLOYMENT HISTORY — list most recent first

Job Title _____ Company _____

Address _____

Immediate Supervisor _____ Telephone No. _____

Duties Performed _____

Number of employees you supervised (if applicable) _____

Date Started (dd/mm/yy) _____ Date Left (dd/mm/yy) _____

Starting salary _____ Salary at time of separation _____

Reason for leaving _____

Job Title _____ Company _____

Address _____

Immediate Supervisor _____ Telephone No. _____

Duties Performed _____

Number of employees you supervised (if applicable) _____

Date Started (dd/mm/yy) _____ Date Left (dd/mm/yy) _____

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Date Started (dd/mm/yy) _____ Date Left (dd/mm/yy) _____

Starting salary _____ Salary at time of separation _____

Reason for leaving _____

REFERENCES — list 3 individuals [not related to you] who are familiar with your work-related skills

1. Name _____

Address _____

Telephone No. _____ Cellular No. _____ Occupation _____

2. Name _____

Address _____

Telephone No. _____ Cellular No. _____ Occupation _____

3. Name _____

Address _____

Telephone No. _____ Cellular No. _____ Occupation _____

I, _____, hereby certify that all information provided on this application is true and correct and I agree and understand that any falsification of information provided, regardless of time of discovery, may cause forfeiture on my part to any employment in Rotoplastics or any of its subsidiary companies. I understand that all

