

EMPLOYMENT APPLICATION FORM

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a resume, but all questions must be answered.

Position applying for	Please specify position if other	Base Location
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PERSONAL INFORMATION

Name (as per CNIC)			
Address	City & Country	CNIC #	Zip Code
Home Telephone Number	Cellular Telephone Number	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>	
E-Mail Address	Emergency Contact #	Next of Kin Relationship	
Employment Start Date	Date of Birth	Age	Marital Status Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow <input type="checkbox"/> Single <input type="checkbox"/>

POSITION INFORMATION

(Check all that you are willing to work)

Hours: Full Time <input type="checkbox"/>	Status: Regular <input type="checkbox"/>		
Part Time <input type="checkbox"/>	Temporary <input type="checkbox"/>		

Are you authorized to work in Pakistan on an unrestricted basis? Yes No

Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.)
 No Yes If Yes: (Please explain reason)

QUALIFICATIONS

(Please list any education or training you feel relates to the position applied for that would help you perform the work, such as Pakistan HEC approved College and/or University Degree(s), Pakistan CAA Licenses or similar license from professional bodies or Technical Programs.)

	Name	Degree	Location
School			
College			
University / Institute			
University / Institute			
Other / Certification			
Other / Certification			

SPECIAL SKILLS

(List any special skills or experience that you feel would help you in the position that you are applying for leadership, organizations/teams, etc.)

Certification / License
 (Please list three Licence or certifications)

Certification /License	Institution / Association	Validity	Location

WORK HISTORY
 Start with your present or most recent employment and work back. Use separate sheet if necessary. (Include paid and unpaid positions)

Job Title #1	Start Date (day/mo/yr)	End Date (day/mo/yr)
Company Name	Line Manager/Supervisor's Name	Phone Number
City	State	Country
Duties:		
Reason for Leaving	Starting Salary (PKR)	Ending Salary (PKR)

May we contact your Present/Last Employer? Yes No N/A

Job Title #2	Start Date (day/mo/yr)	End Date (day/mo/yr)
Company Name	Line Manager/Supervisor's Name	Phone Number
City	State	Country
Duties:		
Reason for Leaving	Starting Salary (PKR)	Ending Salary (PKR)

Job Title #3	Start Date (day/mo/yr)	End Date (day/mo/yr)
Company Name	Line Manager/Supervisor's Name	Phone Number
City	State	Country
Duties:		
Reason for Leaving	Starting Salary (PKR)	Ending Salary (PKR)

Date

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