



RECRUITMENT FORM

ATTN: _____

DETAILS:

Name of Employer: _____

Address: _____

Tel No.: _____ Fax No.: _____

Nature of Business: _____ No. of Staff: _____

Position Offered: _____

No. of Vacancies: _____

Job Description: _____

Working Hours: _____

Working Location: _____

Period of Service: _____ Part-Time: Full-Time:

Salary: Negotiable Basic Salary (please specify): _____

Commission (if any): _____ Allowance (if any): _____

Other Requirements: _____

Remarks: _____

APPLICATION METHODS:

Apply to: _____ Title/Department: _____

directly by the Employer

by mail (company address) by fax: _____

by phone: _____ by others: _____

Documents Required: Covering Letter Resume Photo
 Examination Results Company Application Form

Application Closing Date: _____

CONTACT PERSON FOR FURTHER DETAILS:

Contact Name: _____ Title/Department: _____

Tel No.: _____ Fax No.: _____

Email Address (if applicable): _____

Authorized Signature
with Company Chop

Name in Print

Date