

ANHSIN TECHNOLOGY SDN. BHD. 202301008098(1502019-X)

ANHSIN APPLICATION FOR EMPLOYMENT FORM

| Position Applied For: | |
|-------------------------|--|
| Nature of Employment: | Full Time Employment / Outsource Arrangement / Sole-Vendor |
| Expected Salary: | |
| Notice Period Required: | |

Passport Size Photo

| 1. PERSONAL PARTICU | ILARS | | |
|------------------------|-------|----------------------|--|
| Full Name | | Chinese Name | |
| (as per NRIC/Passport) | | (if any) | |
| Home Address | | | |
| | | | |
| Correspondence | | | |
| Address (if any) | | | |
| | | | |
| Mykad (NRIC) No. | | Email Address | |
| Mobile Phone No. | | Nationality | |
| Home Contact No. | | Passport No. | |
| Marital Status | | Passport Expiry Date | |
| Date of Birth | | Blood Type | |
| Gender | | Religion | |
| Weight (kg) | | Age | |
| Height (cm) | | Race | |
| EPF No. | | Income Tax No. | |
| SOCSO No. | | Income Tax Branch | |

| 2. SPOUSE PARTICULARS (IF APPLICABLE) | | | | |
|---------------------------------------|--|-------------------|--|--|
| Name | | Mykad (NIRC) No. | | |
| Nationality | | Passport No. | | |
| Race | | Mobile Phone No. | | |
| Occupation | | Income Tax No. | | |
| Employer's Name: | | Income Tax Branch | | |

| 3. PARE | 3. PARENTS PARTICULARS | | | | | |
|---------|------------------------|--|------------------|--|--|--|
| Father | Name | | Age: | | | |
| | Occupation: | | Employer's Name: | | | |
| Mother | Name: | | Age: | | | |
| | Occupation: | | Employer's Name: | | | |

| 4. CHILDREN PARTICULARS (IF APPLICABLE) | | | | | | | |
|---|-----------|--------------|---------------------|-----|---------------------|---------------|----|
| No. of Children <18: | | No. of Child | ren <u>></u> 18: | | No. of Children (PC | B Deduction): | |
| Name | NRIC (New |) | Sex | Age | Occupation | Company's Na | me |
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| 5. FAMILY PARTICULARS (BROTHERS & SISTERS ONLY) | | | | | |
|---|--------------|-----|-----|------------|----------------|
| Name | Relationship | Sex | Age | Occupation | Company's Name |
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| 6. EMERGENCY CONTACT PERSON | | | | |
|-----------------------------|--|-------------------|--|--|
| Name: | | Relationship: | | |
| Address: | | House Contact No. | | |
| | | Mobile Phone No. | | |

| 7. EDUCATION | | | | |
|--------------------------------------|------------------|------|-------|---------------------------------|
| University/College/School Attended | Diaco / Location | Dura | ation | Lighast Qualification & Desults |
| University/ College/ School Attended | Place/ Location | From | То | Highest Qualification & Results |
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| 8. SCHOLARSHIP/ SPECIAL AWARDS/ ACHIEVEMENT | | | | | | |
|---|--------------|--------------|---------------------------------------|--|--|--|
| Name of Scholarship/ Award | Year Awarded | Organization | Employment Bonding Period (if any) | | | |
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| 9. FURTHER EDUCATION, TRAINING OR COURSES ATTENDED/ ATTENDING | | | | | | |
|---|-----------------|----------|----|--------------------------------------|--|--|
| Name of Institution | Place/ Location | Duration | | | | |
| | | From | То | Course Title/ Qualification Obtained | | |
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| 10. COMPUTER LITERACY | | | | |
|---|----------|--------------------|----------|--|
| Computer Software Application/ Languages (Give details of any | Profic | iency Level (Pleas | e tick) | |
| application / language which you know) | Beginner | Intermediate | Advanced | |
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| 11. DRIVING LICENSE | | | |
|------------------------------|---------|--------|--|
| Do you have driving license? | Yes/ No | Class: | |

| 12. PROFESSIONAL QUALIFICATION & MEMBERSHIPS OF PROFESSIONAL BODIES | | | | | | |
|---|-------------------|-------------------|--|--|--|--|
| Name of Professional/ Trade/ Business/ Civic Organization | Membership Status | Year of Admission | | | | |
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| 13. LANGUAGE PROFICIENCY | | | | | | |
|--------------------------------------|----------------------|------|--------|-----------------------|------|--------|
| Language/ Dialect | Spoken (Please tick) | | | Written (Please tick) | | |
| (Others, please list at space below) | Slight | Fair | Fluent | Slight | Fair | Fluent |
| English | | | | | | |
| Bahasa Malaysia | | | | | | |
| Mandarin | | | | | | |
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| | | | Duration | | lary/ Benefits | |
|---------------------|---------------|------|----------|-------|----------------|--|
| Name of Employer(s) | Position Held | From | То | Basic | Benefits | Reason for Leaving |
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| 15. GENERAL INFORMATION | |
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| a) Have you ever been detained, charged, or convicted by any court of Law in any country? | Yes / No |
| b) Have you ever been dismissed/ suspended/ subject to disciplinary action from previous employer(s)? | Yes / No |
| c) Have you ever suffered from any physical disability, critical illness/ disease and mental illness? | Yes / No |
| d) Have you had an operation or been treated for any illness during the past 5 years? e) Have you ever had any financial proceedings or bankruptcy carried out against you? | Yes / No |
| f) Do you have any part-time job? | Yes / No |
| g) Have you ever applied for employment with this Company? | Yes / No |
| h) Do you have any immediate family members/ relatives or friends working in this Company? | Yes / No |
| i) Do you have any other commitment conflict to your official duties if you are offered the job? | Yes / No |
| If yes to any of the above, please give details: | |

| 16. REFEREES (2 referees from your previous employers/ schools or university (for fresh graduate only) | | | | | |
|--|------------|-----------------|--------------|---------------|------------|
| Name | Occupation | Employer's Name | Relationship | Email Address | Mobile No. |
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17. DECLARATION

I have read and understood all the above and I further authorize ANHSIN TECHNOLOGY SDN BHD (hereinafter known as "ANTECH") to investigate all statements contained in this application (except as noted) including submitting to a physical examination upon request. I declare that I have not involved in any activities that would cause any conflict of interest with the position and Company herein above applied for.

I hereby certify that the above information given by me is correct and declare that the information contained herein forms an integral part of the contract and I further understand that a misrepresentation or omission of facts called for herein will be sufficient cause for cancellation of consideration for employment or dismissal from ANTECH if I have been employed by ANTECH.

I agree that all personal data provided to ANTECH by me and/or acquired by ANTECH from the public domain, as well as all other supporting documents and/or otherwise provided by me to ANTECH will be subject to ANTECH Privacy and Data Protection Policy ("Statement") as may be varied from time to time. I hereby agree and authorize that ANTECH may collect, use, process and disclose my personal information to relevant parties as deemed fit by ANTECH for purposes relating to my job application and employment thereafter if I am successfully hired for the position I hereby applied for.

| Applicant's Name:Date:Mykad/Passport No:Date: | | | | | | |
|---|----------|-------------|---|-----|--|--|
| FOR OFFICE USE | ONLY | | | | | |
| Interviewed on: | | | Interviewed By: | | | |
| Interviewer's Comments: | | | | | | |
| Decision by Panel: | Recruit/ | KIV/ Reject | Salary Recommendation By Hiring Manager: | | | |
| FOR HR USE ON | LY | | | | | |
| Starting Monthly Basic Salary: | | | Fixed/ Variable Allowances and | | | |
| Position & Level: | | | Incentives: | | | |
| Department: | | | | | | |
| Starting Date: | | | | | | |
| APPROVAL OF A | UTHORIT | Y PANEL | | | | |
| | | | | | | |
| Head of Department CTO | | СТО | СОО | CFO | | |