APPLICATION FORM

INSTRUCTIONS:

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- Applicants are required to fill in this form and to be submitted with updated CV, copies
 of academic certificates addressed to Director of Youth and Sports, Department
 of Youth and Sports, 4th Floor Ministry of Culture, Youth and Sports, Negara
 Brunei Darussalam.
- 2. Please ensure the advertisement code is filled in.
- 3. Applicants is to attach the following documents with the submission of the form:
 - a) Curriculum Vitae
 - b) Academic Certificates i.e. Bachelor Degree certificate, Postgraduate qualifications, or any relevant Higher Education qualifications as listed in Section B.
 - c) Letters of Service/ Proof of Employment, as listed in Section D.
- 4. For applicants applying for Medical Vacancies, please also attach:
 - a) Full Medical Registration of practice after completion of Internship/Preregistration/Foundation Training or equivalent registration.
 - b) Evidence of completion of Internship/Pre-registration/Foundation Training.
 - c) Current medical practicing license, professional practice registration or its equivalent.

APPLICATION FORM

Insert Passport Photo Here

POST APPLIED:		
ADVERTISEMENT CODE:		
A. PERSONAL DETAILS		
Name (as in your passport):		
Gender: Male Female	Date of Birth:	Age:
Country of Birth:	Passport No:	Place of Issue:
Nationality:	Race:	Religion:
Permanent Address:		Post Code:
Mailing Address:		Post Code:
Contact No: (Home)	(Mobile) (Office) Email:
Marital Status: ☐ Single ☐ Marr	ried Divorced Widowed	
Dependents: ☐ Father ☐ Moth		Total No. of dependents:
□ Others:		Desired Pay range per month:
	SPOUSE'S DETAILS	
Name:		Birth Date:

Employer:

Occupation:

B. ACADEMIC QUALIFICATIONS [Bachelor Degree, Postgraduate qualifications, all relevant Higher Education qualifications and Professional Qualifications]								
No		Qualifications	Result	Place	e of study	Type of (Full-time/Dis Learn	e/Part stance	Date Completed (D-M-Y)
1								
2								
3								
4								
5								
-6								
7								
8								
9								
10								
	C. CURI	RENT EMPLOYMENT DETA	ILS					
Status of Pull-time		□ Full-time /	□ Part-time □ Self-employed		□ Unemployed			
	□ Currently studying: (state if any)							
Emp	oloyer							
Add	ress					Contact No		
Job	Title		Employme Period	nt -		Salary/ Pay Rate	\$	per month

Job Description	· Includii · Informa	e a short summary about the ng job scopes and responsibil ation about the place of empl elevant information.	lities.	ing now:			
	LOYMENT Hase list down your journing	IISTORY ob history in chronological orde	ır.				
Employme	nt Period			Employer/Place of	Work	Reasons For	
Start	End	Job Title		Employer/Place of Work (please state private or government)		Leaving	
					*		
	<u>an ing panggangan</u>						
E. REFE	RENCES						
		REFEREE #1		REFEREE #2		REFEREE #3	
Name							
Job Title (Workplace)							
Relationship							
Contact No.							

F. PERSONAL STATEMENT

Email

Provide a personal statement to support yo	ur application. You may include reasons as to why you want to work in Brunei.
Available starting date if selected	
G. DECLARATION & CONSENT	
The above information is true to the best of me for employment.	my knowledge. In submitting this form, I understand that false statements will disqualify
authorize the Ministry of Culture, Youth a	ment is contingent on the result of a reference and background check. Therefore, I hereby and Sports, its authorized affiliates, agents and subsidiary acting on its behalf to verify and verification presented in my application form including but not limited to education,
truthfulness of all statements made in my information provided in the form. The inform point average degree, diploma certification	, its authorized affiliates, agents and subsidiaries acting on its behalf may investigate the application form to contact my former employers or any other persons, who can verify mation/documentation may contain but is not limited to grades, dates of attendance, grade on, employment tenure, license attained, status of license, place of issue and any other verification of the information / documentation provided.
willing that a photocopy of this authoris	questing or supplying such information from any liability arising from such disclosure. I am sation be accepted with the same authority as the original. I further understand and it will remain valid for a period of two years from the date signed.
Full Name (in BLOCK letters):	
Passport / Identity Card Number:	
Signature: Date:	