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| *Swinburne Sarawak collects personal data that is necessary for recruitment related activities, leading to employment offer to be made for selected candidates.*  *Personal data that you provide to the University may be processed, used and disclosed for purposes that the University considers necessary for administration of the recruitment, selection and hiring process.*  *The University is committed to ensuring that the privacy of employee records and personal data is protected and consistent with the Personal Data Protection Act (PDPA) 2010.* |

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|  |  |  | **CHECK LIST**  *Please ensure that the following documents are enclosed or have been submitted* | |
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|  |  |  | Attached passport-sized photograph |
|  |  |  | Copy of academic certificates and transcripts |
|  |  |  | Copy of most recent salary slip |
|  |  |  | Copy of COVID-19 vaccination certificate/card (including any latest booster shot taken) |
|  |  |  | A write-up addressing the Key Selection Criteria stated in the Position Description  *(for Academic Positions and Administration Positions at Assistant Manager level or above)* |
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| **POSITION APPLIED FOR** | Click here to enter text. |

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| **How did you find out about our vacancy?** | | | |
|  | Direct mailing to the University |  | Word of mouth or informed by family / relative / friend |
|  | Careers@Swinburne webpage |  | Newspaper advertisement |
|  | Job portal (e.g. LinkedIn, Indeed, etc.)  *(please specify)*: Click here to enter text. |  | Others *(please specify)*: Click here to enter text. |

*All fields are mandatory to be completed as required – for each applicable section.*

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| **SECTION 1: PERSONAL DETAILS** | | | | | | | | | | | | | |
| **Full Name**  *(as per MyKad or Passport and please underline surname)* | Click here to enter text. | | | | | | | **Salutation**  *(i.e. Prof., Assoc. Prof., Dr., Mr., Ms.)* | | | Click here to enter text. | | |
| **Gender** |  | Female | |  | | Male | | **Date of Birth** | | | Click here to enter a date. | | |
| **Marital Status** |  | | Single | |  | | Married | |  | Widowed | |  | Divorced |
| **Nationality** | Click here to enter text. | | | | | | | **State of Origin other than Sarawak**  *(Malaysian only)* | | | Click here to enter text. | | |
| **Current / Correspondent address:** | Click here to enter text. | | | | | | | **Mobile Telephone Number** | | | Click here to enter text. | | |
| **Home Telephone Number** | | | Click here to enter text. | | |
| **Personal e-mail address** | Click here to enter text. | | | | | | | | | | | | |
| **COVID-19 Vaccination Status** |  | Completed full vaccination: Click here to enter text. (specify number of doses completed) | | | | | | | | | | | |
|  | Completed booster shot | | | | | | | | | | | |
|  | Incomplete vaccination (Reason: Click here to enter text.) | | | | | | | | | | | |
|  | Not vaccinated (Reason: Click here to enter text.) | | | | | | | | | | | |

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| **SECTION 2: ACADEMIC QUALIFICATION**  *Starting with the most recent, please give details of your education at or above degree level.* | | | |
| **Start**  *(Month/Year)* | **End**  *(Month/Year)* | **Awarding Institution** | **Qualification** *(full title)* |
| Click here to enter a date. | Click here to enter a date. | Click here to enter text. | Click here to enter text. |
| Click here to enter a date. | Click here to enter a date. | Click here to enter text. | Click here to enter text. |
| Click here to enter a date. | Click here to enter a date. | Click here to enter text. | Click here to enter text. |
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| **SECTION 3: PROFESSIONAL MEMBERSHIP** | | | | |
| **Name of Professional Body** | **Membership** | | **Type of Membership** | **Role / Position Held**  *(if applicable)* |
| **From**  *(Month/Year)* | **To**  *(Month/Year)* |
| Click here to enter text. | Click here to enter a date. | Click here to enter a date. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter a date. | Click here to enter text. | Click here to enter text. |
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| **SECTION 4: EMPLOYMENT HISTORY**  *List all prior work experience starting with the current or most recent employer.* | | | | | |
| **Employer’s Name and Address** | **Employment Period** | | **Role / Position Held** | **Current / Last Drawn Monthly Salary** | **Reason for Leaving** |
| **From**  *(Month/Year)* | **To**  *(Month/Year)* |
| Click here to enter text. | Click here to enter a date. | Click here to enter a date. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter a date. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter a date. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
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| **SECTION 5: ADDITIONAL INFORMATION** | |
| What is your expected monthly salary? *(For full-time employment only)* | Click here to enter text. |
| If offered employment, the most convenient date to commence work is: | Click here to enter a date. |
| Current notice period required: | Click here to enter text. |

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| **SECTION 6: PROFESSIONAL REFERENCES** *(For full-time employment only)*  *For the personal data you provide of your referees, please ensure that the other individual is informed about our Privacy Collection Notice and the terms of which would also apply to such other individuals. Please also ensure that his or her consent has first been obtained before their personal data is disclosed to us for the purpose set out in our Privacy Collection Notice.* | | | | | | | | | |
| 1. For Academic applications, please provide either (i) two work supervisors or (ii) one work supervisor and one post-graduate studies supervisor as your referees. All referees must have known you for at least 5 years who are not related to you in any way. 2. For non-academic applications, please provide two work supervisors\* as your referees who are not related to you in any way.   ***NOTE****: If work supervisors are not applicable (e.g if you are a fresh graduate), please provide academic referee(s) from your education institution or relevant individual(s) who can provide work or character reference, but who are not related to you in any way.* | | | | | | | | | |
| **REFEREE 1** | | | | | **REFEREE 2** | | | | |
| **Name:** | | Click here to enter text. | | | **Name:** | | Click here to enter text. | | |
| **Position held:** | | Click here to enter text. | | | **Position held:** | | Click here to enter text. | | |
| **Telephone number:** | | Click here to enter text. | | | **Telephone number:** | | Click here to enter text. | | |
| **E-mail:** | | Click here to enter text. | | | **E-mail:** | | Click here to enter text. | | |
| **Relationship to candidate:** | | Click here to enter text. | | | **Relationship to candidate:** | | Click here to enter text. | | |
| **Years acquainted:** | | Click here to enter text. | | | **Years acquainted:** | | Click here to enter text. | | |
| May we contact this referee during the recruitment process prior to any offer of employment made to you? | | | | | May we contact this referee during the recruitment process prior to any offer of employment made to you? | | | | |
| **YES** |  | | **NO** |  | **YES** |  | | **NO** |  |

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| **SECTION 7: GENERAL INFORMATION** | **YES** | **NO** |
| 1. Has any disciplinary action been taken against you during your employment in any company?   If **YES**, please provide details: Click here to enter text. |  |  |
| 1. Have you ever been terminated / dismissed from employment due to any disciplinary action or misconduct?   If **YES**, please provide details: Click here to enter text. |  |  |
| 1. Have you ever been arrested and convicted in a court of law (criminal and civil case)?   If **YES**, please provide details: Click here to enter text. |  |  |
| 1. Do you have any disabilities (physical, mental or emotional)?   If **YES**, please provide details: Click here to enter text. |  |  |
| 1. May enquiry be made from your current employer regarding your work performance and employment verification?   If **NO**, please state your reasons: Click here to enter text. |  |  |
| 1. May enquiry be made from your past employer(s) regarding your work performance and employment verification?   If **NO**, please state your reasons: Click here to enter text. |  |  |
| 1. May enquiry be made for conducting background checks (e.g academic qualification, criminal history if any) pertaining to your job application?   If **NO**, please state your reasons: Click here to enter text. |  |  |
| 1. Are you willing to work overtime?   If **NO**, please state your reasons: Click here to enter text. |  |  |
| 1. Have you previously applied for work at Swinburne Sarawak?   If **YES**, please state the position and date: Click here to enter text. |  |  |
| 1. Do you have any relatives working in Swinburne Sarawak?   If **YES**, provide details: Click here to enter text. |  |  |

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| **SECTION 8: DATA CONSENT & DECLARATION** | | | |
| I understand and consent to the processing of my personal data provided including sensitive personal data – including the collection, use, disclosure, accessing and retention of the data for recruitment purposes within the University’s Privacy Collection Notice at <http://www.swinburne.edu.my/privacy/>, which is accessible on our University homepage. | | | |
| I confirm that the information I have given in this form and any supporting documents is correct. I understand that false or misleading information can result in refusal of employment or be sufficient cause for disciplinary action which includes dismissal after commencement of employment. I understand that if I am offered employment and accept the offer of employment, this employment application form becomes part of my employment records. | | | |
| I understand that the University may check all or any of the information provided as part of my application or given in references. I hereby authorize Swinburne Sarawak a thorough investigation of my employment history, educational background, criminal and credit check where applicable to a position. I agree to cooperate in such an investigation, to execute any consent forms required in connection with those investigations, and release from all liability and responsibility all persons or entities requesting or supplying such information. I understand that employment is conditional based on investigation results. | | | |
|  | | |  |
| Date: | Click here to enter a date. | *(signature)* Click here to enter text. | |