

**INSTRUCTIONS**

Read carefully and follow all directions. Please answer each question clearly and completely.

| 1. Position applied for: | 2. Salary desired: |
| --- | --- |
| 3. Referral sources: [ ] Friend [ ] Relative [ ] Internet Search [ ] Walk-In [ ] Others: |
| 4. Name Family Name      | First Name      | Middle Name      | Maiden Name, if any      |
| 5. Date of Birth:      | 6. Place of Birth (Municipality/City/ Province/Country):      | 7. Country of Nationality:      | 8. Gender: |
| 9. National Identification Number: | 10. Civil Status: |
| 11. Contact Number(s): | 12. Email Address: |
| 13. Current Address:  |
| 14. Permanent Address:   |
| 15. This assignment may require travel and engagement in physical activities. Are there any limitations on your ability to engage in travel? YES ☐ NO ☐ Are there any limitations on your ability to perform in the prospective field of work? YES ☐ NO ☐  |
| 16. Have you taken up legal permanent residence status in any country other than that of your nationality?  YES ☐ NO ☐ If ‘yes’, indicate which country:        |
| 17. Have you ever been arrested, indicted, or summoned into court as a defendant in a criminal proceeding, or convicted, fined or imprisoned for violation of any law (excluding minor traffic violations)? YES ☐ NO ☐ If ‘yes’, give explanation on each case:       |
| 18. Have you been disciplined in, or dismissed from, any of your previous assignments? YES ☐ NO ☐ If ‘yes’, give explanation on each case:       |
| 19. Immediate Family Members (Parents, Spouse, Children)  |
| Name | Relationship | Date of Birth | Gender | City/Country of Birth | Nationality |
|       |       |       |  |       |       |
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|       |       |       |  |       |       |
| 20. Education List all university degree, professional or other equivalent qualifications obtained |
| Name, Place and Country | Years Attended | Degree and Academic Distinction Obtained | Main Course of Study |
| FromMonth/Year | ToMonth/Year |
|       |       |       |       |       |
|       |       |       |       |       |
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|  List schools or other formal training or education from age 14 (e.g. high school, technical school or apprenticeship) |
| Name, Place and Country | Type | Years Attended | Certificates or Diploma Obtained |
| FromMonth/Year | ToMonth/Year |
|       |       |       |       |       |
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|  List any significant publications you have written |
| Journal/Publisher | Title of Publication | Date of Publication (Month/Year) |
|       |       |       |
|       |       |       |
|  |  |  |
|  List professional societies and activities in civil, public or international affairs      |
| 21.Employment Starting with your present post, list in reverse order every employment you have had. Also include service in the armed forces and note any period during which you were not gainfully employed. If you need more space, please use the attached additional pages |
| Job Title      | Type of Business      | From (Month/Year)      | To (Month/Year)      |
| Name of Employer      | Name of Supervisor      | Salary per Month (USD)0.00 | Benefits      |
| Address of Employer      | Contact Number:      Email:       |
| Number of employees supervised by you: 0  |
| Brief Description of Duties/ Achievements:      |
| Reason for leaving:       |
| Job Title      | Type of Business      | From (Month/Year)      | To (Month/Year)      |
| Name of Employer      | Name of Supervisor      | Salary per Month (USD)0.00 | Benefits      |
| Address of Employer      | Phone Number:      Email:       |
| Number of employees supervised by you: 0  |
| Brief Description of Duties/ Achievements:      |
| Reason for leaving:       |
| Job Title      | Type of Business      | From (Month/Year)      | To (Month/Year)      |
| Name of Employer      | Name of Supervisor      | Salary per Month (USD)0.00 | Benefits      |
| Address of Employer      | Phone Number:      Email:       |
| Number of employees supervised by you: 0  |
| Brief Description of Duties/ Achievements:      |
| Reason for leaving:       |
| Job Title      | Type of Business      | From (Month/Year)      | To (Month/Year)      |
| Name of Employer      | Name of Supervisor       | Salary per Month (USD)0.00 | Benefits      |
| Address of Employer      | Phone Number:      Email:       |
| Number of employees supervised by you:  |
| Brief Description of Duties/ Achievements:      |
| Reason for leaving:       |
| 22. Do you have any objections to our making inquiries from your present or previous employer? YES ☐ NO ☐ |
| 23. List of any office machines or equipment you can use:      |
| 24. Languages |
| Language | Read | Write | Speak | Understand |
| English |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |
|       |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |
|       |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |
|       |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |  Easily ☐ Not Easily ☐ |
| 25. Character References List two persons, not related to you, who are familiar with your character and qualifications. Do not repeat the names of supervisors listed under Employment |
| Name | Occupation or Business | Address | Contact Number | Email Address |
|       |       |       |       |       |
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|       |       |       |       |       |
| WAIVERS AND DISCLOSURES(Please READ carefully and sign below)It is my understanding that this job application, or the granting of an oral interview, does not represent a contract of employment or a promise of future benefits by this organization. I understand and agree that, if hired, my employment will be at-will in nature and may be terminated subject to the provisions of the appointment paper signed by myself and the employer. I also understand that this written statement supersedes any and all oral representations made by agents or representatives ofthis organization.I certify that the information in this application is true, complete and correct. I understand that any misrepresentation or material omission made on this job application form or other document requested by the ASEAN Centre for Biodiversity (ACB) shall be sufficient cause for denial of employment or discharge.I understand that I may be subject to a background check, and hereby authorize to investigate my background to determine any and all information of concern as to my record, whether same is to record or not, and I release employers and persons named in my application from all liability for any damages on account of his/her furnishing said information.I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice.I hereby authorize ACB, to collect and process the data indicated herein for the purpose of my application. I understand that my personal information is protected by Data Privacy Act of the Host Country.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant’s Signature over printed name Date Note: You may be requested to supply copies of documentary evidence to support the statements you have made above. Do not, in any event, submit the original text of reference or testimonials unless they have been obtained for the sole use of this application. |