EMPLOYMENT APPLICATION

General Instructions:

1. All sections should be completed. For items that are not applicable, please state "NA"
2. This form should be complete in BLOCK LETTERS

COMPANY :

☐ **APXARA TRAVEL & EVENTS SDN BHD (626137-K)**

☐ **ACCUCAP MSC SDN BHD (642655-H)**

1. POSITION APPLIED	**POSITION :**			
	EXPECTED SALARY :		**DATE AVAILABLE :**	
2. PERSONNEL PARTICULARS	**NAME :**		**CHINESE CHARACTERS :**	
	ADDRESS :		**HOME TEL NO. :**	
			OFFICE TEL NO. :	
			HANDPHONE NO. :	
	IC NO. :	**DATE OF BIRTH :**	**RACE / DIALECT :**	
	MARITAL STATUS :	**AGE :** **SEX :**	**CITIZENSHIP :**	
	EMAIL ADDRESS :			

3. PARTICULARS OF SPOUSE / PARENTS / BROTHERS / SISTERS	**NAME**	**RELATIONSHIP**	**AGE**	**OCCUPATION**

4. EDUCATION	**NAME OF SCHOOL / COLLEGE / UNIVERSITY**	**COURSE**	**QUALIFICATION** (e.g.: Certificate / Diploma / Degree, etc)	**FROM**	**TO**

5. LANGUAGE	**LANGUAGE / DIALECT**	**SPOKEN**			**WRITTEN**		
		FLUENT	**FAIR**	**SLIGHT**	**FLUENT**	**FAIR**	**SLIGHT**

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6. EMPLOYMENT HISTORY	**FROM**	**TO**	**EMPLOYER**	**JOB TITLE / DEPARTMENT**	**LAST DRAWN PAY**	**REASONS FOR LEAVING**
	**Kindly be guided that you are required to show 3 months salary slip from your last employer during interview or post interview upon our acceptance*					

7. MEDICAL & OTHER INFO	a. Are you suffering from any physical disability/illness that requires you to be on medication for prolong period?	YES / NO
	If yes, please specify:	
	b. Have you ever been detained, charged, or convicted by a court of law in any country?	YES / NO
	If yes, please specify:	
	c. Have you ever been served with a notice of bankruptcy, made or discharged as a bankrupt?	YES / NO
	If yes, please specify:	
	d. Have you ever been suspended or dismissed from employment?	YES / NO
	If yes, please specify:	

8. NEXT OF KIN ***(For emergency contact purposes)***	**NAME**	**RELATIONSHIP**	**CONTACT NUMBER**

DECLARATION	I hereby declare that the particulars provided are true to my knowledge and that I have not wilfully suppressed any material fact. I understand that misrepresentation or omission of any material fact required in this form will be sufficient cause to terminate my services of I have been employed. _____ Signature Date: Name:

Aavii Purpose

To build relationships everyday through trust so that our employees, clients, vendors & investors will recommend us to their friends, prospects & associates.

Aavii Core Values

1. BUILD RELATIONSHIP THROUGH TRUST – Build a positive environment to achieve great things together as a team.
2. 100% - Always give our best possible shot. It's not just what you do in front of people. It's what you do when no one is watching!
3. FOCUS ON OUR CUSTOMERS – Nothing is personal. Focus on the customer and all else will follow.
4. EMBRACE CREATIVITY TO CREATE CHANGE – Always do things better than the first time to create your desired result.