



LIFE COMMUNITY SERVICES SOCIETY

APPLICATION FOR EMPLOYMENT

Please attach recent photograph

POSITION APPLIED FOR : _____

Please complete the form in BLOCK LETTERS. For items, which are not applicable, please state "NA". Where there is an asterisk (*), please delete accordingly.

PERSONAL PARTICULARS

Name (Underline surname) Dr/ Mr/ Mrs/ Miss/ Mdm*		Name in Chinese Characters		NRIC/ Passport No. (Pink / Blue)*	
Postal Address:					
Gender: (Male / Female)*	Age:	Date of Birth:	Country of Birth:	Nationality:	
Contact No: (HP)	(H)	(O)	Email Address:		
Marital Status:	Dialect Group:	PR of Singapore (Yes/ No/ NA)*	Race:	Religion:	

PARTICULARS OF IMMEDIATE FAMILY MEMBERS

Relationship	Name	Citizenship	Date of Birth	Occupation	Employer/ School
Emergency Contact Person		Relationship		Telephone number	

COMPUTER SKILLS (please tick ✓)	LINGUISTIC PROFICIENCY								
<input type="checkbox"/> Microsoft Word	Languages /Dialects			Spoken *			Written *		
<input type="checkbox"/> Microsoft Excel				G	F	P	G	F	P
<input type="checkbox"/> Microsoft Access	English								
<input type="checkbox"/> Microsoft PowerPoint	Mandarin								
<input type="checkbox"/> Others (pls specify)	Others :								
* G= Good F= Fair P = Poor									

EDUCATION AND TRAINING

School/Institution	Course Studied	Duration of course		Highest Academic Qualifications Attained
		From (Year)	To (Year)	
<i>Most recent</i>				

DETAILS OF EMPLOYMENT (Current Employment)

Name of Company:		Address of Company:	
Position:	Date of first appointment:	Gross Salary/ Month:	Reasons for wanting to leave:
Brief description of your job duties:			

EMPLOYMENT HISTORY (In chronological order)

Name of Employer	Position held	Gross salary/month	Period (mm-yy)	Reason for leaving

CHARACTER REFERENCES (Referees must be non-relatives who know you well)

Name	Address/Email	Contact No	Occupation	Years known

SALARY EXPECTED	NOTICE PERIOD REQUIRED	EARLIEST STARTING DATE

OTHER INFORMATION

1)	Have you ever been convicted in a court of law in any country?	Yes / No*
2)	Have you been dismissed or suspended from the service of any employer? If so, give reasons	Yes / No*
3)	Are you a bankrupt or a discharged bankrupt?	Yes / No*
4)	Do you suffer from any physical impairment of disease including mental illness, deafness handicap, etc? If yes, please specify:	Yes / No*
5)	Are you currently attending any course? (if yes, please specify)	Yes / No*
6)	Are you currently pregnant? (for female applicants only)	Yes / No*
7)	Are you related to any of the Board Member or Employee of LCSS? If yes please disclose	Yes / No*
	Name of the person you know in LCSS:	

Below to be filled only for Life Student Care teaching positions:

8) What do you think are the important skills to be a good Student Care Teacher?

9) What motivates you to apply to be a Student Care Teacher?

HOBBIES / INTERESTS

Declaration

I, the undersigned, hereby declare that I have not been previously convicted of:

- a) any offence involving child abuse or child neglect
- b) any offence under Section 375 or 376A of the Penal Code (Cap 224)

I declare that all information given is correct and true, and I understand that any false information given may render me liable, if employed, to dismissal.

Signature of Applicant

Date