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| **1. PERSONAL INFORMATION:** |
| **Surname :** | **Middle Name :** | **First Name :** |
| **Maiden Name:**  | **Previous Name (s) (if there was a name change):**  |  |
| **Address :** | **Date of Birth :** |
| **Gender:**  Male  Female  Prefer not to declare | **Marital Status:**  Single  Married  Widowed  Prefer not to Declare |
| **National ID / DP / Passport :** | **NIS Number :** | **BIR Number :** |
| **Mobile Phone:** | **Bank Account Details :** |
| **Home Phone:** | **E-mail Address :** |
| **Position Applied for :** | **Date Available :** | **Desired Salary :** |
| **Do you have any conditions that would make you unfit to work in the position for which you are applying?** |  YES |  NO |
| **If Yes, please explain:** |
| **Are you a citizen of Trinidad & Tobago?** |  YES |  NO | **If not, are you authorized to work in T&T.? Please provide authorization document e.g. work permit / CARICOM Skills Certificate** |  YES |  NO |
| **Have you ever been terminated from a job?** |  YES |  NO | **If yes, why?** |
| **Have you ever been convicted of any felonies or been incarcerated in connection with any felonies other than minor traffic violations for the past seven years?** |  YES |  NO | **If yes, please provide details:** |
| **Do you have any pending serious criminal matters?** |  YES |  NO | **If yes, please provide details:** |
|  |
| **2. EDUCATION & TRAINING:** |
| **University/College :** | **Address :** |
| **From : To :** | **Area of Study :** | **Did you graduate?  YES  NO** |
| **Education Level Achieved :** Certificate  Diploma  Associate Degree  Bachelor’s Degree  Post Graduate Diploma  Master’s Degree  Other |
|  |
|  |
| **University/College :** | **Address :** |
| **From : To :** | **Area of Study :** | **Did you graduate?  YES  NO** |
| **Education Level Achieved :** Certificate  Diploma  Associate Degree  Bachelor’s Degree  Post Graduate Diploma  Master’s Degree  Other |
|  |
| **Secondary School :** | **Address :** |
| **From :** | **To :** | **Did you graduate?** | ** YES** | ** NO** | **Education Level Achieved :** |
| ***Other School [ Technical or Vocational]:*** | **Address :** |
| **From :** | **To :** | **Did you graduate?** | ** YES** | ** NO** | **Education Level Achieved :** |
|  |
| **3. SKILLS: Please list any special skills, training or proficiencies, you have that are applicable for the position you are applying for:** |
|   |
|  |
| **4. INTERESTS/ACCOMPLISHMENTS:** |
| You may wish to list significant experience, interests & accomplishments gained while working as a volunteer or as a hobbyist that may be useful in the position (s) you are seeking. You may also include professional memberships & associations. |
|   |
|   |
|   |
|   |
|   |
| **5. EMPLOYMENT HISTORYStarting with your PRESENT or MOST RECENT EMPLOYER list in consecutive order ALL Employment for at least the past FOUR employers.** |
| **Company** | **Phone** | **( )** |
| **Address** | **Supervisor** |
| **Job Title** | **Starting Salary** | **$** |   | **Ending Salary** | **$** |
| **Responsibilities** |
| **From** | **To** | **Reason for Leaving** |
| **May we contact your previous supervisor for a reference?** |  YES |  NO |
|  |
| **Company** | **Phone** | **( )** |
| **Address** | **Supervisor** |
| **Job Title** | **Starting Salary** | **$** |   | **Ending Salary** | **$** |
| **Responsibilities** |
| **From** | **To** | **Reason for Leaving** |
| **May we contact your previous supervisor for a reference?** |  YES |  NO |
|  |
| **Company** | **Phone** | **( )** |
| **Address** | **Supervisor** |
| **Job Title** | **Starting Salary** | **$** |   | **Ending Salary** | **$** |
| **Responsibilities** |
| **From** | **To** | **Reason for Leaving** |
| **May we contact your previous supervisor for a reference?** |  YES |  NO |
|  |
| **Company** | **Phone** | **( )** |
| **Address** | **Supervisor** |
| **Job Title** | **Starting Salary** | **$** |   | **Ending Salary** | **$** |
| **Responsibilities** |
| **From** | **To** | **Reason for Leaving** |
| **May we contact your previous supervisor for a reference?** |  YES |  NO |
|  |
| **6. REFERENCES** |
| ***Please list three Professional references. Your referee must NOT be a relative.*** |
| **Full Name** | **Email** |
| **Company** | **Phone ( )** |
| **Address** |
| **Full Name** | **Email** |
| **Company** | **Phone ( )** |
| **Address** |
| **Full Name** | **Email** |
| **Company** | **Phone ( )** |
| **Address** |
|   |
| **NOTICE TO APPLICANT** |
| **As a condition of employment, all applicants for employment by Concepts and Services Company Limited are required to:** |
| **a)         Undergo a medical examination declaring you fit to perform the duties of the position for which you are applying.** |
| **b)          Submit a Police Certificate of Good Character.** |
| **c)           Submit a passport size photo.** |
| **d)          Be prepared to perform their duties in a professional and efficient manner, and to work in accordance with the policies of Concepts and Services Company Limited and/or the client to which you may be assigned.** |
| **During your term of employment, the need for your service/expertise may result in your relocation to various client offices.** |
|  |  |  |  |  |  |  |  |  |
| **7. EMERGENCY CONTACT INFORMATION – NEXT OF KIN** |
| **Full Name:** | **Mobile :** |
| **Address :** | **Relationship:** |
|   |
| **8. MEDICAL DECLARATION** |
| **Blood Type:** |  |
| **Do you have any pre-existing medical conditions?** |  YES |  NO |
| **If yes, please provide specific details:** |
| **Do you have any allergies?** |  YES |  NO |
| **If yes, please provide specific details:** |
| **Do you have any medical condition that will impact your ability to perform work to a safe and satisfactory standard?** |  YES |  NO |
| **If yes, please provide specific details:** |
|  |
| **8. EMPLOYEE DECLARATION** |
| **I, hereby certify that the information provided above is accurate. I** **understand and acknowledge that Concepts and Services Company Limited may conduct further background checks to assess my suitability for employment. If any information provided in sections 1, 2, 3, 4, 5, 6 and 8 is deemed to be inaccurate, Concepts and Services Company Limited reserves the right to terminate my employment / consultancy.** |
| **Signature:** | **Date:** |