



SINGAPORE PUBLIC SERVICE JOB APPLICATION FORM

You may attach additional pages if necessary.

(A) POSTS(S) APPLIED FOR (in order of preference)	Ministry:
<ol style="list-style-type: none">1.2.3.	
Are you prepared to consider posts other than those you have listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No	

(B) MY INFORMATION	
Full name in NRIC/Passport: (Underline surname)	ID Type: <input type="checkbox"/> NRIC (Pink) <input type="checkbox"/> NRIC (Blue) <input type="checkbox"/> Passport ID Number:
Present Citizenship: <input type="checkbox"/> Singapore <input type="checkbox"/> Others – Country: Held since:	Permanent Resident: <input type="checkbox"/> Singapore <input type="checkbox"/> Others – Country: Since:
Other Citizenship (if any):	
Email address:	Contact number (with country code): ()
Notice Period (e.g. immediately, within one month):	

(C) MY WORK EXPERIENCE Share with us your work experiences starting with the most current/recent employer	
Organisation:	Date Joined:
Job Title:	Date Left:
Description (to include type of employment, e.g. permanent/contract/casual):	

(D) MY COMPETENCIES Share with us the competencies you possess that may be relevant to the role you are applying for

Competency:

Description:

Share with us how you have displayed this competency:

Competency:

Description:

Share with us how you have displayed this competency:

(E) MY QUALIFICATIONS Please indicate your qualifications starting with your highest academic qualification

Qualification Level:

I am currently studying

Duration of course: ___ year(s) ___ month(s)

Certificate Type/Expected Certificate Type:

Institution:

Year of Graduation:

Country of Study:

Institution Issuing the Qualification (if different from
Institution Attended):

Qualification Level:

I am currently studying

Duration of course: ___ year(s) ___ month(s)

Certificate Type/Expected Certificate Type:

Institution:

Year of Graduation:

Country of Study:

Institution Issuing the Qualification (if different from
Institution Attended):

(F) DECLARATION

(1) I hereby give my consent to the relevant Government agencies to:

(a) Obtain and verify information from or with any source (including third parties) as may be deemed appropriate by the relevant Government agency for the purposes of assessing my application for employment; and

(b) Share my personal data set out in this application form and any other personal data subsequently provided by me in connection with my application for employment with other Government agencies for the purposes of recruitment and review of recruitment practices and for such personal data to be also used as part of de-identified and aggregated data for reporting purposes.

(2) I declare that all the information given by me in this application for employment and any additional documents attached hereto are true to the best of my knowledge and that I have not wilfully suppressed any material fact. I accept that if any of the information given by me in this application is in any way false or incorrect, my application may be rejected, any offer of employment may be withdrawn, my employment with the Service may be terminated summarily or I may be dismissed from the Service.

By signing below, I hereby certify that I have read and understood all of the clauses above and that I agree to all of them.

Signature of Applicant: _____

Date: _____

Note:
The following sections are optional.

MY PROFESSIONAL REGISTRATION	
Year of Registration	Professional Board

LANGUAGE PROFICIENCY	
Language/Dialect	Proficiency
	<input type="checkbox"/> Written & Spoken <input type="checkbox"/> Spoken Only
	<input type="checkbox"/> Written & Spoken <input type="checkbox"/> Spoken Only
	<input type="checkbox"/> Written & Spoken <input type="checkbox"/> Spoken Only

AWARDS & PRIZES	
Year	Description

CCA/SPORTS (Please enter only major/key activities)		
Date From	Date To	CCA/Sports (Please indicate position held or level of participation)