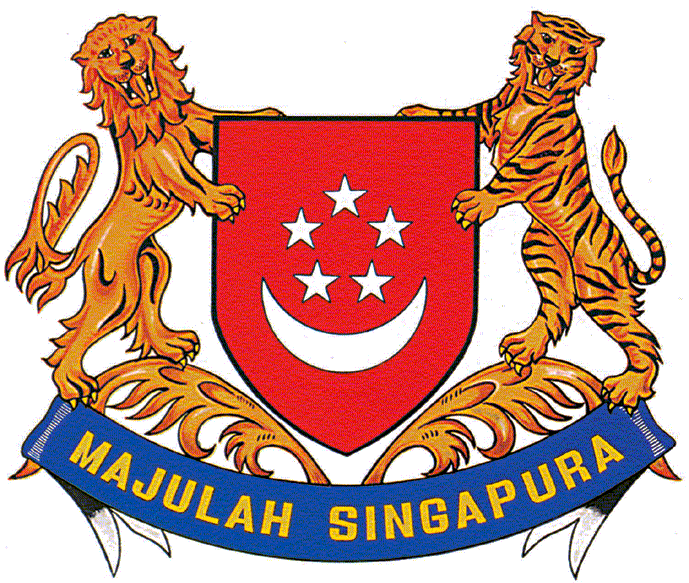
**SINGAPORE PUBLIC SERVICE**

**JOB APPLICATION FORM**



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| You may attach additional pages if necessary. |
| **(A) POSTS(S) APPLIED FOR** (in order of preference) **Ministry:** |
| Are you prepared to consider posts other than those you have listed above?  Yes  No |

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

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| **(C) MY ASPIRATION** |
| **What are your career aspirations and why do you want to join the Public Service?** |

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| **(D) MY WORK/INTERNSHIP EXPERIENCE** | |
| **Organisation:**  **Job Title:** | **Date Joined:**  **Date Left:** |
| **Description** (to include type of employment, e.g. permanent/contract/casual)**:** | |
| **Organisation:**  **Job Title:** | **Date Joined:**  **Date Left:** |
| **Description** (to include type of employment, e.g. permanent/contract/casual)**:** | |
| **Organisation:**  **Job Title:** | **Date Joined:**  **Date Left:** |
| **Description** (to include type of employment, e.g. permanent/contract/casual)**:** | |
| **Organisation:**  **Job Title:** | **Date Joined:**  **Date Left:** |
| **Description** (to include type of employment, e.g. permanent/contract/casual)**:** | |

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| **(E) MY QUALIFICATIONS (TERTIARY)** If you wish to highlight subjects that are relevant to the job, please provide details. | |
| **Qualification Level:**  **Duration of course:** year(s) month(s)  **Institution:**  **Country of Study:** | **Certificate Type/Expected Certificate Type:**  **Year of Graduation:**  **Institution Issuing the Qualification** (if different from  Institution Attended):  **Country of Institution Issuing the Qualification:** |

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| **(F) MY QUALIFICATIONS (NON-TERTIARY)** If you wish to highlight subjects that are relevant to the job, please provide details. | |
| **Qualification Level:**  **Duration of course:** year(s) month(s)  **Institution:** | **Certificate Type/Expected Certificate Type:**  **Year of Graduation:**  **Country of Study:** |

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| **(G) ACADEMIC SCHOLARSHIPS & BURSARIES** | | | | | |
| **Date From** | **Date  To** | **Sponsoring Organisation** | **Name of Scholarships/Bursaries** | **Bonded From** (year) | **Bonded To** (year) |
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| **(H) OTHER CERTIFICATIONS** | |
| **Title of Certificate Obtained:** | |
| **Institution Issuing the Qualification:** | **Country of Institution Issuing the Qualification:** |
| **Year Obtained:** |  |

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| **(I) LANGUAGE PROFICIENCY** | |
| **Language/Dialect** | **Proficiency** |
|  | Written & Spoken  Spoken Only |
|  | Written & Spoken  Spoken Only |
|  | Written & Spoken  Spoken Only |

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| **(J) CURRENT PROFESSIONAL REGISTRATION** | |
| **Year of Registration** | **Professional Board** |
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| **(K) 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.  (b) Share my personal data set out in this application form with other Government agencies for the purposes of recruitment and review of recruitment practices and for it 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 or 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |