



**MACS**  
AL MUTHATHAWERA

Affix  
Photograph

**Job Application Form**

Date:

Full Name:

Position Applied For:

Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	<u>Visa Status</u>
Nationality: _____	Residence Visa <input type="checkbox"/>
Date of Birth: _____	Father/Husband Sponsorship <input type="checkbox"/>
Marital Status: Single Married	<u>N.O.C available:</u>
Local Address: _____ _____ _____	YES <input type="checkbox"/> NO <input type="checkbox"/>
Telephone No.: _____	VISIT VISA <input type="checkbox"/>
	Valid till: _____

Do you hold a current UAE driving license:	Expected Salary:
Yes <input type="checkbox"/> No <input type="checkbox"/>	Dhs. <input type="text"/>
If "Yes", which type? (Please click in the box)	<u>Notice required to join:</u>
Car <input type="checkbox"/> Light Bus <input type="checkbox"/>	Immediately <input type="checkbox"/>
Heavy Bus <input type="checkbox"/> Heavy Goods Vehicle <input type="checkbox"/>	One month <input type="checkbox"/>
Others (Specify): _____	If more than one month (Specify): _____

**FOR COMPANY USE:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Qualification**

From	To	University / Institution	Certificate / Degree	Country

Languages	Spoken			Written		
	Excellent	Good	Fair	Excellent	Good	Fair
Languages known						

**Work Experience (Please mention last three positions including the present job)**

From	To	Company Name	Position Held	Country	Salary

**Computer Knowledge**

Specify the following	Excellent	Good	Fair
Windows			
MS Word			
MS Excel			
PowerPoint			
Others (Specify)			

- Did you hold any position with MENASCO previously: Yes  No

If "Yes" specify position: \_\_\_\_\_

Section: \_\_\_\_\_

- Do you have any disabilities, any serious injury, or illness: Yes  No

If "Yes" Specify: \_\_\_\_\_

**APPLICANT'S DECLARATION**

I hereby declare that the information given is correct to the best of my knowledge and that I have not withheld any information, which may affect my suitability for employment, any misrepresentation or facts or material omission such as health or experience, shall be a cause for dismissal.

**Applicant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Attachments:**

- ) A copy of the Curriculum Vitae.
- ) Copies of Educational Qualification Certificate.
- ) Copies of Experience Certificates (if applicable).
- ) Copy of Passport and Visa.
- ) One Photograph.
- ) Copy of Driving License (if applicable)