

# **IMMEDIATE JOB VACANCY**

# **DIRECTOR, FINANCE & OPERATIONS**

The Malaysian Timber Certification Council (MTCC) is a leading organisation championing sustainable forest management practices. We seek a passionate and strategic **Director of Finance & Operations** to join our mission.

#### **VACANCY DETAILS**

| NO  | ITEM                   | DESCRIPTION   |                                  |  |  |  |
|-----|------------------------|---|----------------------------------|--|--|--|
| 1.  | Position               | Director, Finance & Operations  |                                  |  |  |  |
| 2.  | Unit                   | Finance & Operations  | Finance & Operations             |  |  |  |
| 3.  | Availability           | June 2024   |                                  |  |  |  |
| 4.  | Position Status        | Permanent   |                                  |  |  |  |
| 5.  | Gross Salary Scale     | Starting Gross Salary (RM) 7,565  | Annual Salary Increment (RM) 270 |  |  |  |
| 6.  | Terms of Appointment   | The applicants must be a Malaysian citizen with no criminal records.  |                                  |  |  |  |
| 7.  | Entry qualification    | A BACHELOR'S DEGREE IN ACCOUNTING.  |                                  |  |  |  |
| 8.  | Language qualification | Strong written and verbal communication skills in English and Bahasa Melayu.  |                                  |  |  |  |
| 9.  | Experience             | Minimum <b>seven years</b> of working experience in the related field in most recent years.   |                                  |  |  |  |
| 10. | Required skill(s)      | Our ideal candidate is someone with experience in the COLLECTIVE management of accounts, investment portfolios, office administration, human resources and purchasing. Experience in investment portfolio monitoring and management will be an added advantage. |                                  |  |  |  |
| 11. | Attributes expected    | Candidate should also possess strategic thinking skills, strong financial acumen, exceptional leadership and communication abilities and a commitment to operational excellence and continuous improvement. A highly ethical                                    |                                  |  |  |  |

| NO  | ITEM             | DESCRIPTION  |
|-----|------------------|--|
|     |                  | and meticulous professional with a pleasant personality, who excels under pressure, is adept at networking, people person and thrives in people-centric environments.  |
| 12. | Additional terms | Proficiency in relevant software (e.g., accounting software, excel).   |
| 13. | Probation period | Minimum period of 6 months   |
| 14. | Responsibilities | i. Finance: Overseeing and improving all operational aspects of the company, including financial strategies, budgeting, and forecasting, ensuring accurate financial reporting and compliance with regulations. Responsibilities include managing cash flow, investments, and audits, while identifying and mitigating financial risks. Strategic planning, stakeholder engagement, and leadership are integral to this role, ensuring the organization's financial health and growth. Secretary to the Finance and Investment Committee meeting.    |
|     |                  | ii. Accounting: Handling accounting operations is pivotal. Responsibilities include managing financial records, preparing full accounts, ensuring compliance with accounting standards, and overseeing audits. They lead budgeting efforts, provide financial insights, and manage relationships with auditors and regulators. Through these responsibilities, they uphold financial integrity and support strategic decision-making within the organisation.  |
|     |                  | iii. Human Resource (HR): Monitoring human resources matters and policies, ensuring effective recruitment, training, and development of staff. Manage compensation, benefits, and employee relations, ensuring compliance with labor laws and regulations. By integrating HR functions with financial strategies, they contribute to creating a cohesive and productive workforce while supporting the organisation financial objectives. Additionally, involved in the Personnel and Remuneration Committee for matters related to Human Resources. |
|     |                  | iv. Administrative matters: Manages administrative functions within the organization, support the CEO  |

| NO  | ITEM                 | DESCRIPTION  |
|-----|----------------------|--|
|     |                      | and collaborate with the company secretary to MTCC for related corporate governance and compliance for the Board of Trustees, protocols for document management, record-keeping, and internal communication to streamline operations and facilitate decision-making. Additionally, oversee administrative functions such as facilities and procurement and IT operations, including system implementation and maintenance.                                   |
| 15. | Company benefit      | <ul> <li>i. EPF</li> <li>ii. SOCSO</li> <li>iii. Flexible work arrangements upon confirmation</li> <li>iv. Medical insurance</li> <li>v. Parking &amp; transportation benefit</li> <li>vi. Compassionate leave</li> </ul> Additional benefits upon confirmation <ul> <li>i. Annual optical &amp; dental benefit</li> <li>ii. Marriage leave</li> <li>iii. Pilgrimage leave</li> <li>iv. Paternity leave</li> <li>v. Maternity leave &amp; benefit</li> </ul> |
| 16. | Place of duty        | Kuala Lumpur, Malaysia   |
| 17. | Application deadline | 2 June 2024  |

### **HOW TO APPLY**

Interested applicant is invited to submit the following documents:

- 1. MTCC Employment Form;
- 2. Cover Letter;
- 3. Resume/ Curriculum Vitae with two referees (referees should have contact number and email);
- 4. A copy of Sijil Pelajaran Malaysia (SPM) or an equivalent qualification recognised by the Government; and
- 5. A copy of the Bachelor's Degree/Master's Degree Certificate/Professional Certificate.

The completed application and the required documents should be submitted to the following email address: <a href="mailto:recruitment@mtcc.com.my">recruitment@mtcc.com.my</a>. ONLY SHORTLISTED CANDIDATES WILL BE CONTACTED VIA EMAIL.

#### **JOB INTERVIEW**

Only qualified and shortlisted applicants will be interviewed. The application that does not receive a response after 4 months from the closing date of the advertisement shall be considered unsuccessful. The applicant fully bears all expenses for attending the interview.

#### **INTERVIEW RESULT**

The results of the interview will only be communicated to successful applicants.

## **ENQUIRY**

For inquiry or further information, you may contact Executive Human Resource and Administration, Mr. Ahmad Muzhaffar Razali at <a href="mailto:muzhaffar@mtcc.com.my">muzhaffar@mtcc.com.my</a> / 03-2161 2298.

JOB ADVERTISEMENT PUBLICATION DATE: 22 MAY 2024



# MALAYSIAN TIMBER CERTIFICATION COUNCIL

Photo

C-08-05, Block C, Megan Avenue II, No. 12, Jalan Yap Kwan Seng, 50450 Kuala Lumpur
Tel: 603 – 2161 2298 Fax: 603 – 2161 2293 E-mail: info@mtcc.com.my Website: www.mtcc.com.my

#### **EMPLOYMENT APPLICATION FORM**

#### NOTE TO APPLICANTS

- 1. Only one application form should be submitted to MTCC. Applications for more than one post should be submitted individually.
- 2. An application shall be accompanied by photocopies of all certificates and relevant documents as evidence that the applicant meets the required academic and other requirements.
- 3. All expenses related to this application shall be borne by the applicant.

| Phone No : \_\_\_\_\_ Fax No. : \_\_\_\_\_\_

| Date of Birth :                    |            |       | Age          | :                     |                 | <del></del>                           |
|------------------------------------|------------|-------|--------------|-----------------------|-----------------|---------------------------------------|
| Marital Status :                   |            |       | Sex          | :                     |                 |                                       |
| I.C No. :                          |            |       | Citizens     | ship :                |                 | · · · · · · · · · · · · · · · · · · · |
| II. FAMILY DETAILS                 |            |       |              |                       |                 |                                       |
| Marital Status:                    |            |       |              | Date<br>Marris        |                 |                                       |
| Spouse Name:                       |            |       |              | Marriage: Occupation: |                 |                                       |
| Spouse Employer's<br>Name/Address: |            |       |              |                       |                 |                                       |
| Father's Name:                     |            |       |              | Age:                  |                 |                                       |
| Employer's Name:                   |            |       | <del> </del> | Occu                  | pation:         |                                       |
| Mother's Name:                     |            |       |              | Age:                  |                 |                                       |
| Employer's Name:                   |            |       | <del> </del> | Occu                  | pation:         |                                       |
| NAME (                             | OF CHILDRE | N     |              |                       | ATE OF<br>BIRTH | SEX                                   |
|                                    |            |       |              |                       |                 |                                       |
|                                    |            |       |              |                       |                 |                                       |
|                                    |            |       |              |                       |                 |                                       |
| NAME OF OIR INC                    |            | SEX   | 0001104      | TION                  | _               | MDI OVED                              |
| NAME OF SIBLING                    | S AGE      | (M/F) | OCCUPA       | IION                  | E               | MPLOYER                               |
|                                    |            |       |              |                       |                 |                                       |
|                                    |            |       |              |                       |                 |                                       |
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|  |                  |            |             |                                     |            |  |
|  |                  |            |             |                                     |            |  |
|  |                  |            |             |                                     |            |  |
| II. ACADEMIC QUALI                                       | FICATIONS        |            |             |                                     |            |  |
| Name of Cabacia  |                  | Dur        | ection      | Decul                               | / CCDA of  |  |
| Name of Schools, College and                             | Location         | Duration   |             | Result/ CGPA of Certificate/Diploma |            | Year of                                |
| University attended                                      |                  | From       | То          |                                     | e Obtained | Graduation                             |
|  |                  |            |             |                                     |            |  |
|  |                  |            |             |                                     |            |  |
|  |                  |            |             |                                     |            |  |
|  |                  |            |             |                                     |            |  |
| use additional pages if nec                              | essary)          |            |             |                                     |            |  |
| Extracurricular Activi                                   | tice in School/  |            |             |                                     |            |  |
| College, University/                                     | Association/     | ı          | Position/A  | ctivity & L                         | ocation    | Year                                   |
|  | •                |            |             |                                     |            |  |
|  |                  |            |             |                                     |            |  |
|  |                  |            |             |                                     |            |  |
| (use additional pages if pag                             | 2000#4           | <b>'</b>   |             |                                     |            | I                                      |
| use additional pages if ned                              | essary)          |            |             |                                     |            |  |
| V. RELATED WORK EX                                       | XPERIENCE        |            |             |                                     |            |  |
| A many and a summary thy a many lay                      | od: (Voc / No)   |            |             |                                     |            |  |
| Are you currently employ<br>f yes, please fill in as bel |                  |            |             |                                     |            |  |
|  |                  |            |             |                                     |            |  |
| current employer:  |                  |            |             |                                     |            | ······································ |
| eason searching for new                                  | / job:           |            |             |                                     |            |  |
|  |                  |            |             |                                     |            |  |
| Present Salary: RM                                       | /month           | า          |             |                                     |            |  |
| MTCC reserves the right                                  | t to request for | the last s | alary state | ment)                               |            |  |

Expected Salary: RM \_\_\_\_\_/month

| Position &<br>Duration         | Name of<br>Employer | Address              | Responsibility/<br>Project/ Task/<br>Achievement<br>Summary |             | Reason to leave |  |
|--------------------------------|---------------------|----------------------|---|-------------|-----------------|--|
|                                |                     |                      |   |             |                 |  |
| (use additional pages          | s if necessary)     |                      |   |             |                 |  |
| V. OTHER WORK                  | EXPERIENCE (I       | F ANY)               |   |             |                 |  |
| Position                       | Name of<br>Employer | Address              | 5   | Contact No. | Duration        |  |
|                                |                     |                      |   |             |                 |  |
|                                |                     |                      |   |             |                 |  |
| (use additional pages          |                     |                      |   |             |                 |  |
| VI. OTHER INF                  | ORMATION            |                      |   |             |                 |  |
| Language Proficie              | ency: (Please tick  | ✓ accordingly)       |   |             |                 |  |
|                                | <u>Spoken</u>       |                      | Written   | ļ.          |                 |  |
| Bahasa Malaysia                | Fluent Fai          | ir Weak              | Fluent  | Fair        | Weak            |  |
| English [                      | Fluent Fai          | ir Weak              | Fluent  | Fair        | Weak            |  |
| Others*                        | Others*             |                      |   |             |                 |  |
| (Please indicate)              | *                   |                      |   |             | <del> </del>    |  |
| Other certified lan            | guage proficiency   | tests i.e.: (MUET/IE | LTS/TOEFL   | <b>)</b> *: |                 |  |
|                                |                     |                      |   |             |                 |  |
| *Please attach the certificate |                     |                      |   |             |                 |  |
| Computer Skill: (F             | Please tick 🗸 ac    | cordingly)           |   |             |                 |  |
| MS Office (Word)               | Begi                | nner Intermedia      | te Adva   | nced        |                 |  |
| MS Office (Excel)              | Begin               | ner Intermediate     | e Advar   | nced        |                 |  |
| MS Office (PowerP              | oint) Begin         | ner Intermediat      | e Advai   | nced        |                 |  |
| MS Office (Access)             | Begin               | ner Intermediate     | e Advan   | iced        |                 |  |

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| Othe  | er:   |
|-------|---|
| (Plea | ase indicate)   |
| Othe  | er skills (i.e. Video editing / creative writing/ data analytics/ trade or commodity analysis):   |
| Othe  | er competencies: (i.e. Certified Integrity Official, Natural Language Processing):  |
| Heal  | th Status: (Please  ✓ tick accordingly)   |
| 1. A  | ny sign/symptoms presented?   |
|       | No  |
|       | Yes, please provide full details:   |
|       | Which part of body  |
| 2.    | Which part of body affected?  |
| 3.    | What is the underlying cause?   |
| 4.    | What is the exact diagnosis   |
| 5.    | as per informed by doctor? What is the exact diagnosis  |
|       | as per informed by doctor?  |
| VII.  | PROFFESIONAL REFERENCES   |
| Nam   | es of two persons who could provide information about yourself. Please provide <b>latest mation</b> to expedite background check/ verification process. |
| 1.    | Name:   |
|       | Position/ Relationship:   |
|       | Address:  |
|       |   |
|       | Email:  |
|       | Tel. No. :  |

| 2.        | Name :       |                                   |
|-----------|--------------|-----------------------------------|
|           |              | Relationship:                     |
|           | Address:     |                                   |
|           |              |                                   |
|           | Email:       |                                   |
|           | Tel. No. :   |                                   |
|           |              |                                   |
| l hereby  | declare tha  | at the above information is true. |
|           |              |                                   |
| Applicant | 's signature | e :                               |
| Data      |              |                                   |
| Date      |              | ·                                 |