

Human Resource Section
Malaysian Timber Certification Council
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
Email: info@mtcc.com.my
Website: www.mtcc.com.my



Malaysian Timber Certification Council Employment Application Form

NOTE TO APPLICANT

The following documents must be submitted together with this form.

1. Cover Letter;
2. Resume/ Curriculum Vitae with two referees;
3. Two (2) recommendation letters within three (3) months of this job application;
4. Copy of professional and academic certificates;
5. Copy of National Registration Identity Card (NRIC);
6. Copy of three (3) months latest salary slip; and
7. Passport-sized colour photograph (softcopy).

PART A: EMPLOYMENT & PERSONAL INFORMATION

EMPLOYMENT INFORMATION

Name : _____

Age : _____

NRIC No. : _____

Position Applied : _____

Date Applied : _____ Earliest Available Date: _____

Desired Salary : _____

EPF No. : _____

SOCSSO No. : _____

Income Tax No. : _____

Insert photo

PERSONAL INFORMATION

Contact Number: _____

Personal Home Office

Residential Address: _____

Address Line 1

Address Line 2

City State Postcode

Postal Address: _____

(fill in if different from above)

Address Line 1

Address Line 2

City State Postcode

Date / Place of Birth : _____

Date of Birth Place of Birth

Gender / Ethnicity : _____

Gender Ethnicity

Citizenship / NRIC: _____

Citizenship NRIC

Marital Status: Single Married
 ☐ ☐

Have you ever been convicted for criminal offences?
If yes, please specify:

YES NO
☐ ☐

Do you have any relatives or friends currently employed or have been previously employed by this Organisation?
If yes, please specify:

YES NO
☐ ☐

Name: _____ Relationship: _____ Designation: _____
Name: _____ Relationship: _____ Designation: _____

ACADEMIC QUALIFICATIONS

To complete this section, please attach relevant copies of your academic transcript. Use additional pages if necessary.

Qualification: _____ Area of Study: _____

Educational Institution: _____
From: _____ To: _____ Grade: _____

Qualification: _____ Area of Study: _____

Educational Institution: _____
From: _____ To: _____ Grade: _____

Qualification: _____ Area of Study: _____

Educational Institution: _____
From: _____ To: _____ Grade: _____

MUET Certification

To complete this section, please attach relevant copies of your MUET certification.

MUET Band/Result : _____
Year & Session: _____

Extracurricular Activities (School / College / University / Association / Community)

(School / College / University / Association / Community)	Activities / Position / Location	Year

PREVIOUS EMPLOYMENT

Company Name / Organisation: _____ Phone No.: _____

Location: _____ Designation: _____

Reason for leaving: _____ Last drawn salary: _____

Responsibilities: _____

From: _____ To: _____ Period of Service: _____

Company Name / Organisation: _____ Phone No.: _____

Location: _____ Designation: _____

Reason for leaving: _____ Last drawn salary: _____

Responsibilities: _____

From: _____ To: _____ Period of Service: _____

Company Name / Organisation: _____ Phone No.: _____

Location: _____ Designation: _____

Reason for leaving: _____ Last drawn salary: _____

Responsibilities: _____

From: _____ To: _____ Period of Service: _____

OTHER UNRELATED EMPLOYMENT (IF ANY)

Company Name / Organisation: _____ Phone No.: _____

Location: _____ Designation: _____

Reason for leaving: _____ Last Drawn Salary: _____

Responsibilities: _____

From: _____ To: _____ Period of Service: _____

Company Name / Organisation: _____ Phone No.: _____

Location: _____ Designation: _____

Reason for leaving: _____ Last Drawn Salary: _____

Responsibilities: _____

From: _____ To: _____ Period of Service: _____

REFERENCES

Do you give consent to this organisation to contact your previous employer(s) for reference?

YES
☐

NO
☐

Full Name: _____ Relationship: _____

Company Name / Organisation: _____ Phone No.: _____

Designation: _____

Full Name: _____ Relationship: _____

Company Name / Organisation: _____ Phone No.: _____

Designation: _____

LANGUAGE PROFICIENCY

Language (Written)	Fair	Good	Excellent	Language (Spoken)	Fair	Good	Excellent
English	☐	☐	☐	English	☐	☐	☐
Bahasa Malaysia	☐	☐	☐	Bahasa Malaysia	☐	☐	☐
Others ()	☐	☐	☐	Others ()	☐	☐	☐
Others ()	☐	☐	☐	Others ()	☐	☐	☐

HEALTH / MEDICAL CONDITIONS

Please indicate if you have any health and medical conditions, including any prolonged illness, or have undergone any major surgery (failure to make full and honest disclosure can be grounds for dismissal):

EMERGENCY CONTACTS

In case of emergency, please contact the following persons:

Name: _____	Relationship: _____	Contact No.: _____
Name: _____	Relationship: _____	Contact No.: _____
Name: _____	Relationship: _____	Contact No.: _____

PART B: OTHER INFORMATION

FAMILY DATA

Name of Father: _____	Occupation: _____
Name of Mother: _____	Occupation: _____
Number of dependants you support: _____	

Sibling(s) Information

Name: _____	Age / Gender: _____	Occupation: _____
Name: _____	Age / Gender: _____	Occupation: _____
Name: _____	Age / Gender: _____	Occupation: _____
Name: _____	Age / Gender: _____	Occupation: _____

Marital Information

Name of Spouse: _____ Occupation: _____

Children

Name: _____ Age / Gender: _____ Occupation: _____

Name: _____ Age / Gender: _____ Occupation: _____

Name: _____ Age / Gender: _____ Occupation: _____

Name: _____ Age / Gender: _____ Occupation: _____

TALENTS / SKILLS

Please specify:

HOBBIES

Please specify:

PARTICIPATION IN ACTIVITIES RELEVANT TO THE APPLIED POSITION

Please state your participation in activities that may be relevant to the applied position:

PART C: DISCLAIMER & CONSENT**DISCLAIMER & CONSENT**

- ☐ I hereby certify that the above information provided by me is accurate and is subject to verification by the Malaysian Timber Certification Council. If employed, I agree that if any particulars herein are subsequently found to be false, Malaysian Timber Certification Council may dismiss me without any liability whatsoever.
- ☐ I hereby grant consent to Malaysian Timber Certification Council to collect, obtain, store, and process the personal data that I have given in this form, for the purposes of administration and processing, in accordance with the Personal Data Protection Act 2010.

Signature : _____ Date: _____

Name : _____

This applicant is interviewed by the following persons:

1st interview on:

by:

PASS

FAIL

Date

Name

2nd interview on:

by:

PASS

FAIL

Date

Name

9

Subsequent
interview on:

by:

PASS

FAIL

Date

Name

9

This application is:

SUCCESSFUL

□

NOT SUCCESSFUL

四

DEFERRED

□

WITHDRAWN

□

Reason being:

[illegible]