



<b>FOR OFFICIAL USE</b>
Application No: _____
Interview
Date: _____
Time: _____ am/pm

### APPLICATION FOR APPOINTMENT

**INSTRUCTIONS**

- a Only one copy of this Application Form is to be completed in respect of each post applied for and returned to the **Singapore Cruise Centre Pte Ltd.**
- b One photocopy of each of the following is required: (1) Birth Certificate. (2) Citizenship Certificate, if any. (3) Marriage Certificate, if any. (4) Certificate of Service, if applicable. (5) all academic and/or professional certificates/ transcripts and (6) any other testimonials.  
  
They should be stapled in between the pages of the Application Form. All attachments must bear your name.
- c Complete each item in the form which applies to you and insert the words "NIL" or "NOT APPLICABLE" against items which do not apply to you. No space is to be left blank.

Paste a recent photograph of yourself here

1. <b>POST APPLIED</b>				Source and date of advertisement
2. <b>FULL NAME IN BLOCK LETTERS</b> as shown in Identity Card (Underline Surname) Married woman should also state maiden name.	*Mr/Miss/Mrs/Mdm			Home Tel: _____
	Alias (if any)			Office Tel: _____
3. <b>POSTAL ADDRESS IN BLOCK LETTER</b>				Pager _____
	Email Address (if applicable)			Hand phone _____
4. <b>NATIONALITY</b>	Nationality	Race	Religion	Identity Card No.
	Permanent Resident of Singapore (Non-Singaporean) *YES/NO			(*Pink/Blue)
	Birth/Citizenship Certificate No.	Passport No.		Age (last birthday)
	Place of Birth			Date of Birth
5. <b>PHYSICAL MEASUREMENTS</b>	Height (metre)		Weight (kilo)	
6. <b>MARTIAL STATUS &amp; FAMILY PARTICULARS</b>	*SINGLE/MARRIED/DIVORCED/WIDOWED			
	Spouse's Full Name			Nationality
	Profession/Occupation			Place of Birth
	Name and Address of Employer			
	No. of Sons & Ages		No. of daughters & Ages	Total No.
7. <b>PARENTS' PARTICULARS</b>	FATHER'S Name			Nationality
	Address			Place of Birth
	Occupation & Name of Employer			
	MOTHER'S Name			Nationality
	Address			Place of Birth
	Occupation & Name of Employer			

\* Delete whichever inapplicable



<p>(d) State the post-graduate qualification obtained, if any. Indicate if it is obtained through correspondence course/ distance learning/part-time studies.</p> <p>(e) If (b) or (c) above is within the last 5 years, give the name and address of one Lecturer/Tutor/ Professor best acquainted with your conduct and work to whom reference may be made.</p> <p>(f) If you have not yet sat for the final examination, state the examination, the subject and the date you expect to take the examination.</p>	Institution & Country:		From:	To:
	Degree (eg. Masters, Ph.D.):		Month/Year:	
	Title of Thesis:			
	Subjects taken:			
<p>10. <b>OTHER PROFESSIONAL/ ACADEMIC QUALIFICATIONS</b></p> <p>State your professional/ academic qualifications and the dates obtained.</p>				
<p>11. <b>SCHOLARSHIPS/AWARDS</b></p> <p>(a) Give details of any scholarships or awards held including value, duration and type (eg. open competition, restricted or Government Scholarships, bursary, etc. in respect of Sections 8, 9 &amp; 10).</p> <p>(b) State the period of bond (if any) and effective date.</p>			From	To
<p>12. <b>KNOWLEDGE OF LANGUAGES/DIALECTS</b></p> <p>If possible, indicate the standard of proficiency.</p>	Written & Spoken	Spoken Only	Proficiency	
	Your Mother Tongue			
<p>13. <b>EXTRACURRICULAR ACTIVITIES</b></p> <p>Give details of any sporting, social and any other activities you are engaged in.</p>				
<p>14. <b>NATIONAL SERVICE</b></p> <p>Give details of National Service liability under the appropriate heading.</p>	Service: *Army/Air Force/Navy/Police		Rank	
	Type			
	Vocation		Appointment	
	Salary		PES Grading	
	Duties and responsibilities			
	Date Enlisted		Run-Out-Date	
	Actual Period Served (excluding disruption)			
	Period of Regular/Contract Service (if any)			
	Are you exempted from reservist training? (If "YES" attach a copy of relevant document)			*YES/NO
	Are you exempted from National Service? (If "YES" attach a copy of Exemption Letter from Ministry of Defence)			*YES/NO

\*Delete whichever inapplicable

15. <b>PRESENT EMPLOYMENT REMUNERATION (OR LAST EMPLOYMENT IF UNEMPLOYED NOW)</b>	*Present/Last Appointment			Period } From: To:
	Name and Address of Employer (Also state Name and Designation of Immediate Superior)			Salary Per Month # (excluding allowances)
				Allowances (state types and amounts) #
				Annual Bonus #
<b>REFERENCES</b>	Have you any objection to reference being made to your present/last employer? *YES/NO			Gross Annual Salary #
16. <b>POSTS HELD AND EXPERIENCE</b>	Appointment & Period Employed	Name & Address of Employer (Name & Designation of Immediate Superior)	Brief Description of Duties and Responsibilities	Reasons for Leaving
	(a) Give in chronological order a complete record of posts held by you, stating period held, brief description of duties and responsibilities, names and addresses of employers and reasons for leaving. <u>(Periods of unemployment must be included otherwise period unaccounted for will be deemed to be periods of unemployment.)</u>			
	(b) Have you any objection to reference being made to any of these employers: *YES/NO  NOTE: If no indication is made as to whether you have objection to reference being made to your present/past employers, it will be deemed that you have no objection.			
(c) Where any experience has been particularly relevant to the post which you are applying, describe fully the nature of the work undertaken and the period such work was undertaken.	Particulars of experience relevant to post applied and period			
17. <b>COMMENCEMENT OF EMPLOYMENT</b>	How soon after being offered appointment could you commence employment?			
18. <b>DO YOU KNOW OF ANYONE CURRENTLY WORKING AT SCCPL?</b> (HarbourFront Passenger Terminal, Tanah Merah Ferry Terminal, Pasir Panjang Ferry Terminal or the Admin Office)	Person Known to Applicant	Relationship to Applicant	Years Known	Dept / Terminal Worked

\* Delete whichever inapplicable

# Salary documents may be required at a later date

<b>19. PHYSICAL IMPAIRMENT OR DISABILITY</b> Give details of any illness/disease/physical impairment or disability which you now have and/or had previously, including any mental/nervous disorder.			
20. Do you possess a vehicle?                      *YES/NO	State class of valid vehicle licence		CLASS *2/3/4/5
21. Do you have perfect colour vision?	*YES/NO		
22. (a) Have you ever been convicted in a Court of Law in any country? (b) Have you ever been dismissed or suspended from employment? (c) Are you in debt at the present date? (d) Have you any obligation under promissory notes either as principal or surety? (e) Are you an undischarged bankrupt?  Furnish details of any item to which the answer is "YES"	*YES/NO *YES/NO *YES/NO *YES/NO *YES/NO		
<b>23. CHARACTER REFEREES</b>  Give particulars of 2 referees (other than relatives). They should be responsible persons who know you well and at least one should be well acquainted with you in private life. Names of distinguished persons must not be given unless they know you well and have agreed to be your referees.  Testimonials from these referees should not be sent. The company will write to them, if necessary.	Name		
	Address		
	Occupation and name of organisation		Period Known
	Name		
	Address		
	Occupation and name of organisation		Period Known
24. Give any other information which you consider relevant to this application - (e.g. details of attendance at courses, seminars or conferences, etc.)			
25. I declare that all the particulars contained in this application and those in the sheets attached are true and that I have not wilfully suppressed any material fact. I understand that I will be disqualified from appointment or my services will be terminated without any notice if the said particulars are found to be untrue.  Date: .....			
			..... (Signature of Applicant)
26. (Please do not complete this portion. If you are appointed as a result of this application, arrangement will be made for you to complete the following declaration.)  I declare that the statements made by me on .....(date of application) and other further written advices remain unchanged to date and are true and that I have not wilfully suppressed any material fact.  Date: .....			
			..... (Signature of Employee)

\* Delete whichever inapplicable