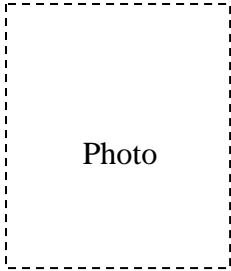




澳門科技大學

MACAU UNIVERSITY OF SCIENCE AND TECHNOLOGY



APPLICATION FORM FOR ADMINISTRATIVE/SUPPORTIVE STAFF

Please use **BLOCK** letters to fill in the followings

I Information of job applied for					
Job Classification	Administrative Staff (/) Supportive Staff			Full-time Part-time	
	Other _____				
Position applied for		Date available	()	Expected Annual Salary	MOP\$ _____
II Personal Particulars					
Name in Chinese			/	Name in English	
Nationality				Country Belong	
Date of Birth				Place of Birth	
Gender	Male	Female	Marital Status		Single Married Other _____
Language Proficiency	Canton		Excellent	Good	Fair Bad
	Mandarin		Excellent	Good	Fair Bad
	English		Excellent	Good	Fair Bad
	Other _____		Excellent	Good	Fair Bad
Type of ID Document	B.I.R.		No.		
	F.S.S.		No.		
	Chinese Visa		No.		
	Passport		No.		
Permanent Address			Address in Macau		
Mobile No. in Macau			Domestic Phone in Macau		
Other Reachable Phone No.			E-mail Address		
Health Condition		Good		Normal Bad	
? Have you ever committed any crimes?		No		Yes Please specify _____	

III Academic Qualifications (in chronological order)					
From / M/Y	To / M/Y	Education Institution	Country	Specialization	Degree Obtained

IV / Professional Qualifications/Memberships (in chronological order)				
From / M/Y	To / M/Y	Course Name	Professional Qualifications Obtained	Issuing Authority

V Working Experience (in chronological order)							
From / M/Y	To / M/Y	Full-time	Part-time	Name of Employer	Position held	Annual Salary	Reasons for leaving

VI Family Background			
Name	Relationship	Occupation	Contact No.

() A4)
(Please supplement on A4 papers and attach together if there is not enough space provided above.)

VII () Referees (Non-family members)			
Name	Relationship	Occupation	Contact No.

VIII Contact person in case of emergency				
(1)	Name		Gender	
	Relationship		Contact No.	
	Address			
(2)	Name		Gender	
	Relationship		Contact No.	
	Address			

IX For non-local applicant only	
Please state if you will come along with your spouse?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please specify his/her name	

X Please attach with below materials required		
Document submitted	Submitted	If not submitted, please specify reasons
1. Photocopy of B.I.R.		
2. Photocopy of other identity document		
3. Certificate Copy of Education		
4. Resume		
5. Certified Documents of Professional Experience		
6. Certificate Copy of Training Courses		
7. Other Materials		

I declare that the information given above is correct. I understand that I shall render myself liable to dismissal of the appointed post for any fake information provided.

I acknowledge the responsibility to update my personal file for any change of data involved.

Signature _____

Date _____ (DD / MM / YYYY)

