

Commence	
Outlet	
Employee #	
HR2000	
CARD/ Fingerprint	
POS	
Bank #	
EPF #	
SOCSO #	



Auntie Anne's®

CHRISNA JENIO GROUP OF COMPANY

11, JLN 4/91A, TAMAN SHAMELIN

PERKASA

CHERAS 56100 KUALA LUMPUR

Tel 03-92004933

NEW PICTURE
(*Gambar
Terbaharu*)

Auntie Anne's Cinnabon
Full Time Part Time

JOB APPLICATION FORM Borang Permohonan Kerja

NOTE TO APPLICANTS

Only one copy of this form needs to be completed and sent to the Human Resource Department. A copy of applicant's academic qualifications and other supporting documents must be attached with this application form.

NOTA KEPADA PEMOHON

Hanya satu salinan borang ini perlu diisi dan dihantar ke Jabatan Sumber Manusia. Salinan kelayakan akademik pemohon dan dokumen sokongan lain mesti disertakan bersama borang permohonan ini.

Position applied & Location (in capital letters) Jawatan yang dipohon & Lokasi (dalam huruf besar)		
Full name of applicant as per identity card / passport Nama penuh pemohon seperti dalam kad pengenalan / pasport	Race Bangsa	Religion Agama
Correspondence Address Alamat Surat-menyurat	Date of Birth Tarikh Lahir	Place of Birth Tempat Lahir
Email Address Alamat Email	Sex Janjina	Tel. No. House: No Telefon Rumah: Mobile: No Telefon Bimbit:
Tiktok:	Instagram:	Facebook:
Marital Status Status Perkahwinan	No. of Children (if any) Bilangan anak (jika ada)	
Nationality Warganegara	Transport: Pengangkutan Car Kereta: <input type="checkbox"/> Motorcycle Motosikal: <input type="checkbox"/>	Driving License / Lesen Memandu Car Kereta: Motorcycle Motosikal:
Identity Card / Passport No. No Kad Pengenalan/ No Passport	Income Tax Number (if any) Nombor Cukai Pendapatan (jika ada)	SOCSO and EPF Number NO No SOCSO & EPF
Languages (Bahasa): Spoken (Percakapan):		
Written (Penulisan):		

FAMILY PARTICULAR
BUTIRAN KELUARGA

Family Particulars: Butiran Keluarga: Father Bapa	Mother Ibu	Spouse Pasangan
Name: Nama	Name: Nama	Name: Nama
Occupation: Pekerjaan	Occupation: Pekerjaan	Occupation: Pekerjaan
HP NO: Tel Bimbit No	HP NO: Tel Bimbit No	HP NO: Tel Bimbit No

Emergency Contact: Talian Kecemasan Name Nama	Occupation Pekerjaan	HP NO Tel Bimbit No

EDUCATION
PENDIDIKAN

Details on education at schools, colleges and/or universities should be filled in the spaces below:

Butiran tentang pendidikan di sekolah, kolej dan/atau universiti hendaklah diisi dalam ruang di bawah:

Name of school/colleges/universities and from which districts Nama Sekolah/ Kolej/ Universiti & Daerah	Year Tahun		Qualifications Kelayakan (Certificate/Diploma/Degree) (Sijil/Diploma/ Ijazah)
	From Daripada	To Kepada	

WORKING EXPERIENCE
PENGALAMAN PEKERJAAN

Past Employer Majikan Lepas	Position Held Jawatan Dipegang	Duration Tempoh year.....mth Tahun/ Bulan From: To:	Basic Salary Gaji Pokok Monthly: RM Bulan: Other allowances: Lain-lain Elaun RM
Reasons for leaving/intending to leave present job. Alasan Berhenti Kerja			

a. State your duties and responsibilities

Nyatakan tugas dan tanggungjawab anda

.....

.....

.....

Past Employer Majikan Lepas	Position Held Jawatan Dipegang	Duration Tempoh year.....mth Tahun/ Bulan From: To:	Basic Salary Gaji Pokok Monthly: RM Bulan: Other allowances: Lain-lain Elaun RM
Reasons for leaving/intending to leave present job. Alasan Berhenti Kerja			

b. State your duties and responsibilities

Nyatakan tugas dan tanggungjawab anda

.....

.....

.....

c. Company References (**Rujukan Syarikat**)

Name and Position
(Nama & Jawatan)

Occupation
(Pekerjaan)

Address/Phone
Alamat / Telefon Bimbit

1)

2)

OTHER INFORMATION
MAKLUMAT LAIN

1.	Any major illness suffered or physical disabilities? Please state Mana-mana penyakit utama yang dihidapi atau kecacatan fizikal? Sila nyatakan	
2.	Do you consume any long-term medication? Adakah anda mengambil sebarang ubat jangka panjang?	Yes / No Please state type of medicine: Ya/ Tidak Sila nyatakan jenis ubat _____
3.	Do you smoke? Adakah Anda Merokok	Yes / No Ya/ Tidak _____
4.	Did you HAVE any typhoid injection? Please provide certificate Adakah anda ADA sebarang suntikan typhoid? Sila berikan sijil	Yes / No Ya/ Tidak Please state the expiry date: _____ Sila nyatakan tarikh luput
5.	Do you attend food handling courses? Please provide certificate Adakah anda ADA menghadiri Kelas Pengendalian Makanan? Sila bekalkan sijil	Yes / No Ya/ Tidak
6.	For female applicant: Are you pregnant at this moment? Untuk Pemohon Perempuan: Adakah anda mengandung pada Ketika ini?	Yes / No Ya/ Tidak Expected delivery date? Jangkaan Tarikh Bersalin? _____
7.	Have you been convicted of any criminal offence? Adakah anda telah disabitkan dengan sebarang kesalahan jenayah?	Yes / No Ya/ Tidak Please state type of offence: _____ Sila nyatakan jenis kesalahan
8.	Has your name been blacklisted by any bank / financial institution etc.? Adakah nama anda disenarai hitamkan oleh mana-mana Institusi Kewangan & Sebagainya?	Yes / No Ya/ Tidak Please state the reason: Sila nyatakan sebab: _____
9.	Any friends/ relatives work in Chrisna Jenio Group Adakah anda ada kawan atau saudara yang bekerja di Chrisna Jenio Sdn Bhd	Yes / No Ya/ Tidak Please state the name and under which department: Sila nyatakan nama dan Jabatan mana Name (Nama) _____ Dept (Jabatan) _____
10.	What is your transportation arrangement to work? Apa kenderaan yang anda gunakan untuk ke tempat kerja?	
11.	Are you prepared to work overtime? Adakah anda bersedia untuk bekerja lebih masa?	Yes / No Ya/ Tidak
12.	Are you prepared to work shift? Adakah anda bersedia untuk bekerja shif?	Yes / No Ya/ Tidak
13.	Estimated Date of Commencement Jangkaan Tarikh Kemasukan	

DECLARATION

I hereby declare that all information contained in this form are true. I understand that any false details given, or any details purposely omitted will provide enough reason for Chrisna Jenio Group Sdn Bhd to revoke any consideration to employ me, or if I have already been employed, to terminate my service accordingly.

Saya dengan ini mengaku bahawa semua maklumat yang terkandung dalam borang ini adalah benar. Saya faham bahawa sebarang butiran palsu yang diberikan, atau sebarang butiran yang sengaja ditinggalkan akan memberikan alasan yang mencukupi untuk Chrisna Jenio Group Sdn Bhd membatalkan sebarang pertimbangan untuk menggaji saya, atau jika saya telah diambil bekerja, untuk menamatkan perkhidmatan saya dengan sewajarnya.

Applicant's signature (**Tandatangan Pemohon**)

Date (**Tarikh**):

I/C (**No Kad Pengenalan**):

For Office Use Only:

Section e: Interview Assessment
Please rate the factors below on a scale of 1 – 5: 1 = Poor, 2 = Below Average, 3 = Average, 4 = Above Average, 5 = Exceptional

Factor	1 st Interviewer	2 nd Interviewer	Remarks
Academic Qualification			
Relevant Knowledge			
Experience / Skills			
Personality			
Overall Impression			
Total	/25 %	/25 %	
Interviewed by:	Name: Date:	Name: Date:	

Section f: Appointment			
Department:		Designation:	
Grade:		Basic Salary:	
Service Charges/Allowance:		Other's remuneration:	
Date of Commencement:		Accommodation provided:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Remarks	<input type="checkbox"/> Replacement <input type="checkbox"/> New Position Name: _____ Basic Salary: _____		

Recommended by Head of Department	Approved by C.E.O	Verified by HR Department
Name & Date:	Name & Date:	Name & Date: