



PRIVATE & CONFIDENTIAL

APPLICATION FOR INTERNSHIP

The Esplanade Co Ltd
 1 Esplanade Drive Singapore 038981
 Tel (65) 6828 8222 Fax (65) 6338 5838

Instructions: 1. Please complete all the information required. Indicate "NA" where information is not available. 2. Photocopies of documents (non-returnable) supporting your application must be attached. 3. Referees should not be relatives or members of the applicant's family.	Department for Placement
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PERSONAL PARTICULARS			
Name (in BLOCK LETTERS, underline surname) according to I/C, Passport			
Alias / Other Name (if any)		Name in Chinese Character (if any)	
Address in Singapore		Postal Code	Email Address
Home Tel No	Office Tel No	Handphone No	
Nationality	Citizenship	Place of Birth	Driving Licence (class)

NATIONAL SERVICE			
National Service Liability / Active Reservist Obligation Yes / No / NA		Date of Next Reservist Training	
Appointment Held	Unit	Rank	Date of Release

EDUCATION (Highest Level Attained)			
<input type="checkbox"/> GCE 'O' level <input type="checkbox"/> GCE 'A' level <input type="checkbox"/> Diploma <input type="checkbox"/> University Degree <input type="checkbox"/> Masters <input type="checkbox"/> Others _____			
School / College / University Attended	Period		Highest Standard Passed
	From (Yr)	To (Yr)	

LANGUAGE PROFICIENCY					
Spoken	<input type="checkbox"/> English	<input type="checkbox"/> Bahasa Melayu	<input type="checkbox"/> Mandarin	<input type="checkbox"/> Tamil	<input type="checkbox"/> Others, pls specify _____
Written	<input type="checkbox"/> English	<input type="checkbox"/> Bahasa Melayu	<input type="checkbox"/> Chinese	<input type="checkbox"/> Tamil	<input type="checkbox"/> Others, pls specify _____

COMPUTER PROFICIENCY & OTHER SPECIAL SKILLS
Knowledge of PC Software Applications (pls specify)

RELEVANT ARTS TRAINING / ADDITIONAL COURSES / TRAINING ATTENDED (Include those currently being pursued)			
Professional / Technical / Special Training Courses & Institutes Attended	Period		Certification
	From	To	
			<input type="checkbox"/> Diploma <input type="checkbox"/> Certificate <input type="checkbox"/> Certificate of Attendance <input type="checkbox"/> Others _____
			<input type="checkbox"/> Diploma <input type="checkbox"/> Certificate <input type="checkbox"/> Certificate of Attendance <input type="checkbox"/> Others _____

EMPLOYMENT HISTORY (Present or Last Job Held)						
Period		Name of Current or Last Employer	Monthly Basic Salary	Monthly Gross Salary	Position Held	Reason/s for Leaving
From	To					

PREVIOUS EMPLOYMENT/S				
Period		Employer	Position Held	Reason/s for Leaving
From	To			

REFEREES				
Name	Tel No	Years Known	Employer	Occupation

OTHER INFORMATION	
Do you have any obligation to any organization in terms of bonds, study loans, sum of money owing etc? • If yes, please give details	* Yes / No
Have you ever been terminated or dismissed from the service of any company? • If yes, please give details	* Yes / No
Do you have any criminal records in Singapore or any other country other than minor traffic violations? • If yes, please give details	* Yes / No
Have you ever applied for a position at The Esplanade Co Ltd before? • If yes, when?	* Yes / No
How did you come to know about this position in The Esplanade Co Ltd? () Advertisement () Friends/Relatives () Agency () Others () Employees of the Company	
Do you have any relatives / friends currently employed by The Esplanade Co Ltd or who are members of the Esplanade Board?	
Name	Relationship
Department	Job Title

INTERESTS / HOBBIES / RECREATIONAL ACTIVITIES / AWARDS

AVAILABILITY FOR INTERNSHIP	
If you are accepted, when can you start your internship?	Please specify exact duration of internship: From _____ (date) to _____ (date)

a. I declare that the information given by me in this application is true to the best of my knowledge and belief. I also declare that I have not withheld any material information, which may affect my application. This declaration shall, if I am employed, constitute an integral part of my internship. I agree and accept that if this declaration is in any part false or incorrect, the employer may terminate my employment without notice.

b. Information entered on this application form is voluntarily given by me as a statement of fact and qualifications for the position applied for and/or hired for. I authorise the Employer to submit the said information to any person, firm, corporation, body, bureau, department, police officials and Police Record Bureau for the purpose of any investigation which the Employer may desire to make with reference thereto. I also indemnify and hold harmless the Employer from all liabilities, demands, claims, suits, proceedings, costs and expenses of any nature in connection with the foregoing.

Name / Signature

Date