|  |  |  |  |
| --- | --- | --- | --- |
| Post Applied for: |       | Available Start Date: |       |

|  |
| --- |
| Job Application Form |

|  |
| --- |
| It is important that you read the job vacancy before completing this application form. Please complete this form fully using ink or type. (double click to fill the form) |
| **THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED CONFIDENTIAL** |

|  |
| --- |
| Personal details |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| First Name: |       | **Last Name:** |       | **Title:** |       |

|  |  |
| --- | --- |
| Address: |       |
|  |       |
|  |       |

|  |  |
| --- | --- |
| Postcode: |       |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Marital Status:** | Married | [ ]  | Single | [ ]  | **Number of Dependent:** |       |
| **Place & Date of Birth:** |       |

|  |  |  |  |
| --- | --- | --- | --- |
| **Home Telephone:** |       | **ID/PASSPORT No:** |       |

|  |  |
| --- | --- |
| **Daytime Telephone:** |       |

|  |  |
| --- | --- |
| **Mobile Telephone:** |       |

|  |  |
| --- | --- |
| **E-mail address:** |       |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Can we contact you at work?** | Yes | [ ]  | No | [ ]  |

**Have you been charged for committing to any crime? If yes please explain:**

|  |
| --- |
|       |

**Are you a member of labour organization or political party? If yes, please state the name, address and your position in the organization:**

|  |
| --- |
|       |

**Yayasan Mercy Corps Indonesia is committed to the community members we work with and the beneficiaries we serve. As part of this commitment, Yayasan Mercy Corps Indonesia has zero tolerance for violations of our Code of Conduct (Sexual Abuse of Beneficiaries and Community Members (PSEA), Anti-Trafficking Policy, Child Safeguarding Policy, Mercy Corps Ethics Complaint and Whistleblower Policy, Sexual Misconduct in the Workplace Policy, Discrimination, Harassment and Bullying Policy, and Anti-Fraud and Corruption).**

|  |
| --- |
| 1. I agree to adhere to and be an ambassador of Yayasan Mercy Corps Indonesia’ Code of Conduct policies.

❏ I agree  |
| 1. I confirm that throughout my professional career I have not violated an employer's Code of Conduct.

❏ I have not violated an employer's Code of Conduct ❏ I have violated an employer's Code of Conduct  |

|  |
| --- |
| **References** |

|  |
| --- |
| Please give the names and addresses of your **3 (three)** most recent employers (your direct supervisor): |

|  |
| --- |
| **Reference 1** |

|  |  |
| --- | --- |
| Name: |       |

|  |  |
| --- | --- |
| Position (job title): |       |

|  |  |
| --- | --- |
| Work Relationship: |       |

|  |  |
| --- | --- |
| Organisation: |       |

|  |  |
| --- | --- |
| Address: |       |
|  |       |
|  | Postcode |       |

|  |  |
| --- | --- |
| Telephone: |       |

|  |  |
| --- | --- |
| E-mail: |       |

|  |
| --- |
| **Reference 2** |

|  |  |
| --- | --- |
| Name: |       |

|  |  |
| --- | --- |
| Position (job title): |       |

|  |  |
| --- | --- |
| Work Relationship: |       |

|  |  |
| --- | --- |
| Organisation: |       |

|  |  |
| --- | --- |
| Address: |       |
|  |       |
|  | Postcode |       |

|  |  |
| --- | --- |
| Telephone: |       |

|  |  |
| --- | --- |
| E-mail: |       |

|  |
| --- |
| **Reference 3** |

|  |  |
| --- | --- |
| Name: |       |

|  |  |
| --- | --- |
| Position (job title): |       |

|  |  |
| --- | --- |
| Work Relationship: |       |

|  |  |
| --- | --- |
| Organisation: |       |

|  |  |
| --- | --- |
| Address: |       |
|  |       |
|  | Postcode |       |

|  |  |
| --- | --- |
| Telephone: |       |

|  |  |
| --- | --- |
| E-mail: |       |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you willing for this referee to be approached prior to the interview? | Yes | [ ]  | No | [ ]  |

|  |
| --- |
| **Remuneration** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|

|  |  |
| --- | --- |
| **Current / Latest Salary/Income (gross):** |       |
| **Other Current Benefit:** |       |

|  |  |
| --- | --- |
| **Salary Expectation (gross):** |       |

 |

Applicant’s Signature & Complete Name