

MoPoTsyo-Patient Information Centre

House nr 9E, Street 3C, Phum Trea 1, Sangkat Stung Meanchey 1

12352 Phnom Penh, Cambodia. E-mail : <u>mopotsyo@gmail.com</u> Photo (front side) 4 x 6

EMPLOYM	ENT APPLICATION	FORM	Date submitted:
*Position applied for:			
*Location:	Phnom Penh		
. PERSONAL DETAII	_S		
*Full Name		*Name in Khr	mer
Nick Name		*Marital Sta	itus
*Date of Birth		*Gen	der
		Vill	age
*Permanent Address		Dist	rict
		Cour	ntry
		Vill	age
*Contact Address		Dist	rict
		Cour	ntry
*Mobil Telephone		*Email Addr	ress
*Father's Name		His	Job
*Mother's Name		Her	Job
Number of sibling		Family book	: ID
		Villa	age
*Permanent Address		Dist	rict
		Cour	ntry
Spouse's Name		His/her	Job
His/her Telephone		Number of Children	
*Do you ha	ave any relatives working in Mol	PoTsyo? □Yes ☑No I	f yes, What is their relationship?
			sition
His/her name		His/her Po	sition

2. LANGUAGE SKILLS

List of your languages skill a	List of your languages skill and tick ✓ (Ex: Excellent, G: Good, F: Fair, P: Poor)															
Languages		Wri	ting			Spea	king			Rea	ding			Liste	ning	
Languages	Ex	G	F	Р	Ex	G	F	Р	Ex	G	F	Р	Ex	G	F	Р
English																
Khmer																

3. YOUR COMPUTER SKILLS

Please fill the column on the right with 0 or 1 according to your capacity. If invited to our office for interview, we may ask you to show us if you have the skills

	Please indicate your skills to work with our	
	computers and software: 0=cannot 1=can	ĺ
	Word	
1	Bullet List, numbered list	
2	Make table of content	
3	make columns and change columns in doc	
4	insert pictures in text, use picture format	i
5	use header-footer, page numbers	
6	Insert Caption for figures and tables	
7	set up-use headings, remove headings, normal	
8	change margins & page orientation	
9	insert or remove page breaks	
10	track changes, accept-not accept	i
	Excel	
11	use filter, sort, copy,paste special	I
12	use PIVOT table	I
13	use count(if), sum, average, median	I
14	move, copy, create, link worksheets, cells,	I
15	create / adapt drop down list	
16	use VLookUP	I
17	insert, delete, hide,unhide comments	<u> </u>
18	use page view to fit for printing	I
19	make/change bar graphs, titles, legend	I
20	use header, footer page numbers	i
	Powerpoint	
21	select/change slide lay-outs, styles,	
22	copy paste graph/figure into ppt	
23	reduce Kb of pictures, prepare for printing hand-outs	
24	use slide sorter	
25	insert Text box, graphs, existing slides	
	Other	
26	Can make a back up	
27	Knows how to make a good password	
28	Can recover documents	
29	Can run virtual meeting (via Zoom or Google Meet)	
30	Knows virus risks and how to keep computer virus free	
31	Knows how to share files for cooperation with others	İ

4. ACADEMIC EDUCATION & PROFESSIONAL QUALIFICATIONS

School Name Legation (situ & country)	Attended		Dograd Ohtain	Major	Have you	
School Name, Location (city & country)	From	То	Degree Obtain	Major	graduated?	
					□ Y or □ N	
					□ Y or □ N	
					□ Y or □ N	

5. TRAINING COURSES ATTENDED

School Name, Location (city & country)	Course Title	Duration	Date Completed mm/yyyy

6. EMPLOYMENT HISTORY. (Please record below the details of your **current or most recen**t employer).

Name of Company			Number of Staff	
Address, Tel.				
Company's Main Activities				
Type of Organization	□- Government □ - NGO	□- Private Compan	/ □-Other:	
Your Position			□ - Full time, □- Volunteer	Part time, □-
Start Date		End Dat	е	
Starting Salary		Ending Salar	у	
Name of Supervisor		His/her Position h/		
Reason for leaving (if applicable)			
Description of your	duties and responsibilities			

ame of Company				Number of Staff
Address, Tele,				
Company's Main Activities				
Type of Organization	□- Government	□- NGO	☑- Private Company	/ □-Other:
Your Position				□- Full time, □- Part time, □- Volunteer
Start Date			End Date	
Starting Salary			Ending Salary	,
Name of Supervisor			His/her Position 8 h/p	
Reason for leaving	(if applicable)			
Description of your				
			of your previous employme	nt beginning with the most recen
ious Employer			of your previous employme	nt beginning with the most recen Number of Staff
ious Employer ame of Company Address, Tele,			f your previous employme	
ious Employer			of your previous employme	
ious Employer ame of Company Address, Tele, Company's Main			f your previous employme	Number of Staff
ious Employer ame of Company Address, Tele, Company's Main Activities Type of	2 (Please record be	elow the details o		Number of Staff
ious Employer ame of Company Address, Tele, Company's Main Activities Type of Organization	2 (Please record be	elow the details o		Number of Staff / -Other:
ious Employer ame of Company Address, Tele, Company's Main Activities Type of Organization Your Position	2 (Please record be	elow the details o	□- Private Company	Number of Staff
ious Employer ame of Company Address, Tele, Company's Main Activities Type of Organization Your Position Start Date	2 (Please record be	elow the details o	□- Private Company	Number of Staff /

7. SUPPORTING INFORMATION

In this section please give person specification for the	your reasons for applying for this positions.	ost and additional inform	ation which shows	now you match the
In this section please expla	ain briefly, why would you like to wo	ork for MoPoTsyo?		
*Did you have a Diabetic o	or Hypertension? □ No □ Yes, (if ye	es, describe your status)		
*Have you ever been arres If "yes", please give details	sted, indicted, or convicted of a crim s of each case?	e or the violation of any	law? □ Yes	□ No
, , ,				
. APPLYING INFORM	TATION			
How did you learn about th	ne job announcement?			
□- Newspaper, □-Universi	ty's board, □- Website, □- friend, □	- other, specify		
When will you be available we notify you?)	for work (how many days after			
The salary you expect if you	ou are employed.			
, , , .	, , , , , ,	l		
. REFERENCES	othou thou wave walation	w mwa.da		
iease list two referees amiliar with your capad	s other than your relatives o city or attitude.	r previous supervis	ors mentioned	above who are
eferee 1				
*Full Name		*Job Title		

* Telephone

*Company or NGO name

Referee 2

*Full Name	*Job Title	
*Company or NGO name	* Telephone	

10. DECLARATION

I certify that all information I have provided above is true, complete and correct to the best of my knowledge and belief. I understand that any false or withheld information on this application form leads to termination or dismissal.

Signature		
Name	Date	

11. ATTACHMENTS

*Attachments:

1. A copy of obtained certificate/Diploma with certified and academic record (if any).

2. A copy of national identification/family book/certificate of birth.

3. Other supporting documents if necessary.

(please send only copies. Do not send original documents as they will not be returned)

^{*} Please return this form by e-mail to mopo.adm.ast@gmail.com with copy email to mopo.adm.ast@gmail.com You will be asked to sign the form when you attend for a writing test or an interview.