



EMPLOYMENT REGISTRATION

Section 1: Personal Information

Last name : _____
First name(s) : _____
Date of birth : _____
Place of birth : _____
Nationality : _____
ID or Passport # : _____ Expires _____
Address : _____
Telephone : _____ Cell. _____
E-mail : _____
Profession : _____
Gender : _____
Religion : _____
Marital status : Single / Married / Divorced/ Widow(er)/ Living Together
Children under 18 : _____ Age (s) _____
Driver's Lic. No : _____ A B C D E
Do you own transportation: Yes No
Are you employed: Yes No, since _____
May we contact your (previous) employer: Yes No
Have you been convicted of a crime within the last 5-10 years: Yes No
If yes, explain: _____

Do you have any health restrictions: Yes No

Do you have any form of disability: Yes No

Date available for work: _____

Fulltime Part time Evenings Weekends

Are you willing to work overtime if required: Yes No

Are you willing to travel if required: Yes No

What type of work are you interested in:

1st preference: _____

2nd preference: _____

Section 2: Educational Background

What is your highest level of education completed?	Diploma		Period
() None			_____
() Primary	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
() Secondary	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
() Associates degree	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
() Bachelors degree	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
() Masters degree	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
() Other: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____

If you answered yes above please state your field of study here:

Have you obtained any other certificates? Yes: _____ No

Are you willing to attend classes to advance your career and personal growth?

Yes No, why: _____

What is (are) your field(s) of interest?

1st preference : _____
 2nd preference : _____
 3rd preference : _____

Languages (please indicate which one is applicable to you)

	Good	Fair	Little	None
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dutch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spanish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Papiamentu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
French	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creole	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Computer Skills

Indicate below your computer knowledge: Basic Intermediate Advanced

() Microsoft Word	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
() Microsoft Excel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
() Microsoft PowerPoint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
() Microsoft Publisher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
() Microsoft Access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
() Photo Shop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
() Quickbooks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
() Internet navigation (Google)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Describe your personality:

- Very outgoing
- Outgoing
- Easy to get along with
- Slightly reserved
- Extremely reserved

Describe your confidence level:

- High
- Medium
- Low

Describe your stress level:

- Well
- Manageable
- Not well

Indicate your strengths and values (*choose the 3 greatest*):

- Creative
- Open minded
- Independent
- Leadership skills
- Flexible
- Team player
- Assertive
- Responsible
- Reliable
- Punctual
- Trustworthy
- Communication skills

What are your hobbies/ interests?

What are your career goals?

Section 3: Employment History

Provide the following information of your most recent and/or current employer(s).
Please explain any gaps in employment in comment section.

Company: _____
Address: _____
Telephone: _____ Fax: _____ Cell: _____
Position: _____
Supervisor: _____
Reason for leaving: _____
Date employed from: _____ until _____

Company: _____
Address: _____
Telephone: _____ Fax: _____ Cell: _____
Position: _____
Supervisor: _____
Reason for leaving: _____
Date employed from: _____ until _____

Company: _____
Address: _____
Position: _____
Supervisor: _____
Reason for leaving: _____
Date employed from: _____ until _____

What was your last weekly/ bi-weekly/ monthly salary?

NAfls _____ USD \$ _____ Gross/Net

Comments (including explanation of any gaps in employment or additional information you would like us to consider)

Section 4: References

List three professional references that **are not** related to you.

● Name : _____
Profession : _____
Contact no.: _____

● Name : _____
Profession : _____
Contact no. : _____

● Name : _____
Profession : _____
Contact no.: _____

I represent and warrant that I have read and fully understand the foregoing in seeking employment under the submitted conditions, as well as for receipt of the document "Client Rights & Responsibilities".

Sint Maarten,

Date _____ Signature of applicant _____