



CV. Sari Pacific

EMPLOYEE INFORMATION

Name: _____
 First _____ Middle _____ Last _____

Address: _____

Telephone: _____ Email: _____

Position Applying For: _____ Religion: _____

Single / Married: _____ Ethnic: _____

If necessary for the job, I am able to work overtime? Yes No

I will be able to report to work _____ days after being notified I am hired

Tell us why you are interested to join our team:

EMPLOYMENT HISTORY

List most recent employment first. Include temporary jobs. Be sure all your experience or employers related to this job are listed here.

<u>Company Name:</u> <u>Position Title:</u> Pay: Rp Per: Month	<u>Responsibilities:</u> <u>Accomplishments:</u> <u>Responsibilities:</u> <u>Accomplishments:</u>	Start Date: End Date: Reason for Leaving: 	Start Date: End Date: Reason for Leaving:
<u>Company Name:</u> <u>Position Title:</u> Pay: Rp Per: Month	<u>Responsibilities:</u> <u>Accomplishments:</u>	Start Date: End Date: Reason for Leaving: 	Start Date: End Date: Reason for Leaving:

<u>Company Name:</u>	<u>Responsibilities:</u>	<u>Start Date:</u>	<u>End Date:</u>
<u>Position Title:</u>	<u>Accomplishments:</u>	Reason for Leaving:	
Pay: Rp Per: Month			
<u>Company Name:</u>	<u>Responsibilities:</u>	<u>Start Date:</u>	<u>End Date:</u>
<u>Position Title:</u>	<u>Accomplishments:</u>	Reason for Leaving:	
Pay: Rp Per: Month			

EDUCATION

	Institution Name	Years Completed	Field of Study	Graduate or Degree
College/University				
High School				

SKILLS & QUALIFICATIONS

Other qualifications such as special skills, abilities or honor that should be considered:

Types of computers, software, and other equipment you are qualified to operate or repair:

Professional licenses, certifications or registrations:

Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to the employer's attention:

WORK REFERENCES

List all personal references who are former supervisors.

Name Company Position Telephone Years Known

Name Company Position Telephone Years Known

Name Company Position Telephone Years Known

Name Company Position Telephone Years Known

FAMILY REFERENCES

List all members in your family.

Name Relationship Occupation Telephone Email

Name Relationship Occupation Telephone Email

Name Relationship Occupation Telephone Email

Name Relationship Occupation Telephone Email

CONTACT

In case of accident or illness, please contact:

Name: _____ Daytime Phone: _____

Address: _____ Relationship: _____

INFORMATION TO THE APPLICANT

As part of our procedure for processing your employment, your personal and employment references may be checked. If you may have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job.

If necessary for employment, you may be required to: provide police record, have a drug test, or to sign non-confidential agreement and abide its terms. I understand and agree to the information shown above.

Signature of Applicant

Date