

# BUAH HATI & CITA HATI SCHOOL



## APPLICATION FOR EMPLOYMENT

### A. Check (v) Desired Employment

- |   |  |
|---|--|
| <input type="checkbox"/> Preschool Principal / Teacher    | <input type="checkbox"/> Senior High Principal / Teacher |
| <input type="checkbox"/> Kindergarten Principal / Teacher | <input type="checkbox"/> Part Time Teacher               |
| <input type="checkbox"/> Elementary Principal / Teacher   | <input type="checkbox"/> Administration                  |
| <input type="checkbox"/> Junior High Principal / Teacher  | <input type="checkbox"/> _____                           |

Location : ☐ East / ☐ West Campus / ☐ \_\_\_\_\_

### B. Personal Data

Name : \_\_\_\_\_ (M / F)  
Identity / Passport Number : \_\_\_\_\_  
Place / Date of Birth : \_\_\_\_\_  
Address : \_\_\_\_\_  
Nationality : \_\_\_\_\_  
Phone / Fax Number : \_\_\_\_\_  
Mobile Phone Number : \_\_\_\_\_  
Email Address : \_\_\_\_\_  
Marital Status : \_\_\_\_\_  
Religion : \_\_\_\_\_

#### FAMILY

Name	Relationship	Occupation	Contact Number

#### FORMAL EDUCATION

College / University	Dates From	To	GPA / Degree	Year of Graduation

#### WORKSHOPS / SEMINARS ATTENDED

Field	Institution / Organization	City	Year

#### ORGANIZATION MEMBERSHIP

Name of Organization	Position	Year

### C. Employment History (start with most recent job)

1. Employer / Supervisor : \_\_\_\_\_  
Address : \_\_\_\_\_  
Phone No. / Email Address : \_\_\_\_\_  
Working Since / Until : \_\_\_\_\_  
Monthly Salary (Start & Final): \_\_\_\_\_  
Last Job Title : \_\_\_\_\_  
Reason(s) for Leaving : \_\_\_\_\_  
\_\_\_\_\_
  
2. Employer / Supervisor : \_\_\_\_\_  
Address : \_\_\_\_\_  
Phone No. / Email Address : \_\_\_\_\_  
Working Since / Until : \_\_\_\_\_  
Monthly Salary (Start & Final): \_\_\_\_\_  
Last Job Title : \_\_\_\_\_  
Reason(s) for Leaving : \_\_\_\_\_  
\_\_\_\_\_

### D. JOB DATA

(Check areas in which you have had experienced or training)

- |  |                          |
|--|--------------------------|
| ___ Computer Skills (Please specify program) _____ | ___ Counseling           |
| ___ Library Management                             | ___ Accounting           |
| ___ Sunday School Teacher                          | ___ Electrical           |
| ___ Writing and Editing                            | ___ Building Maintenance |
| ___ Musical Instrument                             | ___ Others _____         |

### E. Health

How would you describe your general health?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Hearing \_\_\_\_\_ Eyesight \_\_\_\_\_

Physical defects, if any? \_\_\_\_\_

Date of last physical examination \_\_\_\_\_

## F. General Information

1. Have you ever applied for any position in this Institution?  
\_\_\_\_ Yes, I have \_\_\_\_\_ No, I haven't
2. Do you have any friends / relatives working in this Institution? (Please specify)  
\_\_\_\_\_
3. (local staff only) Have you ever taken any work related tests / Psychological test or others?  
\_\_\_\_ Yes, I have \_\_\_\_\_ No, I haven't  
If Yes, please specify (When, Where, Purpose, Type of Test)  
\_\_\_\_\_
4. a. What level would you like to teach? (For teachers only)  
\_\_\_\_\_  
b. What level have you taught?  
\_\_\_\_\_
5. What is your ultimate goal professionally and your plan for reaching that goal?  
\_\_\_\_\_  
\_\_\_\_\_
6. Would you like to work full time or part time? \_\_\_\_\_
7. a. Do you own a house or vehicle?  
\_\_\_\_ Yes, I do \_\_\_\_\_ No, I don't  
Please specify \_\_\_\_\_  
b. Do you have a Driver's Licence? (please specify) \_\_\_\_\_
8. Do you have a habit of      a) smoking? \_\_\_\_ Yes \_\_\_\_ No      c) drug abuse? \_\_\_\_ Yes \_\_\_\_ No  
   b) drinking? \_\_\_\_ Yes \_\_\_\_ No      d) gambling? \_\_\_\_ Yes \_\_\_\_ No
9. Have you ever been convicted of a crime?  
\_\_\_\_ Yes, I have \_\_\_\_\_ No, I haven't  
If yes what matter? What year? Please specify \_\_\_\_\_
10. Are you willing to support us regarding morality, dress code, and Christian beliefs?  
\_\_\_\_ Yes, I am willing \_\_\_\_\_ No, I am not willing
11. Are you willing to be placed in any positions under the Yayasan Pendidikan Kristen Buah Hati?  
\_\_\_\_ Yes, I am willing \_\_\_\_\_ No, I am not willing
12. Are you willing to work overtime if required?  
\_\_\_\_ Yes, I am willing \_\_\_\_\_ No, I am not willing
13. Are you willing to abide by the rules of the institution?  
\_\_\_\_ Yes, I am willing \_\_\_\_\_ No, I am not willing
14. Start Date \_\_\_\_\_
15. Approximate salary expected? \_\_\_\_\_

## G.Character References (other than relatives or previous employer)

1. Name : \_\_\_\_\_  
Address : \_\_\_\_\_  
Phone Number : \_\_\_\_\_  
Email Address : \_\_\_\_\_  
Occupation : \_\_\_\_\_  
Years Known / Relationship : \_\_\_\_\_
  
2. Name : \_\_\_\_\_  
Address : \_\_\_\_\_  
Phone Number : \_\_\_\_\_  
Email Address : \_\_\_\_\_  
Occupation : \_\_\_\_\_  
Years Known / Relationship : \_\_\_\_\_

## G.Additional Information

**(Please do not complete if not applicable)**

1. Name of Church / Denomination : \_\_\_\_\_
2. Address of Church : \_\_\_\_\_
3. Name of Pastor : \_\_\_\_\_
4. Please list any religious or social activities

\_\_\_\_\_  
\_\_\_\_\_

5. Please describe your statement of faith

\_\_\_\_\_  
\_\_\_\_\_

**I the undersigned certified that statements made by herewith are complete and true  
to the best of knowledge and belief.**

**I understand that any willful misstatement may lead to disqualification or to dismissal.**

Date, \_\_\_\_\_

\_\_\_\_\_  
Signature

[www.bchati.sch.id](http://www.bchati.sch.id)

Authorized:



Accredited by

