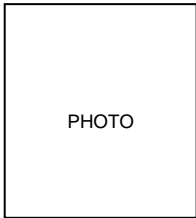


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/MAJOR:1) \_\_\_\_\_ 2 \_\_\_\_\_

/DATE: \_\_\_\_Y/\_\_\_\_M/\_\_\_\_D/

**/ PERSONAL INFORMATION**

/NAME \_\_\_\_\_ /GENDER \_\_\_\_\_ /ID \_\_\_\_\_ /BIRTH PLACE \_\_\_\_\_  
 /BIRTH DATE \_\_\_\_Y/\_\_\_\_M/\_\_\_\_D /NATIONALITY \_\_\_\_\_ /POLITICAL STATUS \_\_\_\_\_  
 /HOME ADDRESS \_\_\_\_\_ /ZIP \_\_\_\_\_  
 /TEL \_\_\_\_\_ /MP \_\_\_\_\_ Email: \_\_\_\_\_  
 / DORM ADDRESS: \_\_\_\_\_ /TEL \_\_\_\_\_  
 / EMERGENT CONTACT: \_\_\_\_\_ /HEIGHT \_\_\_\_\_ Cm /WEIGHT \_\_\_\_\_ Kg  
 /HU KOU \_\_\_\_\_   /FILE KEEPER \_\_\_\_\_  
 /EXPECT SALARY(PRE-TAX) \_\_\_\_\_  
 /DO YOU HAVE A SEVERE MEDICAL HISTORY? \_\_\_\_\_  
 /THE CHANNEL THAT YOU KNOW THE RECRUIT INFORMATION \_\_\_\_\_  
 / DO YOU HAVE RELATIVES OR FRIENDS WORKING IN OUR COMPANY? YES  NO   
 CONSIDERING YOUR SAFETY, RIDE MOTORCYCLE IS NOT ALLOWED, DO YOU ACCEPT THE POLICY?

**/ EDUCATIONAL BACKGROUND**

SCHOOL	FROM...TO...	NAME OF SCHOOL	MAJOR	CITY	POSITION	GRADUATE OR NOT
/ HIGH SCHOOL						
/ UNIVERSITY						
/ OTHERS						

**/ MAJOR RECORDS**


IS THERE ANY MAJOR COURSE RESTUDY? YES  COURSE \_\_\_\_\_ NO

**/ TRAINING & CERTIFICATE**

SKILL	TRAINING CONTENT	GRADE & SCORE	WHEN PASSED
/ ENGLISH			
THE SECOND LANGUAGE			
/ COMPUTER			
/ OTHERS			

?WHEN AND WHERE HAVE BEEN REWARDED?

?  
DO YOU HAVE ANY CRIMINAL RECORD OR PUNISHMENT?IF YOU HAVE, PLEASE NOTE:

**/ FAMILY MEMBERS AND MAIN SOCIAL RELATIONS**

RELATION	NAME	COMPANY	POSITION

~ **/ CAMPUS PRACTICE ( FROM CURRENT TO FORMER ONES )**

FROM...TO...	INSTITUTE	DEPARTMENT POSITION	MAIN WORK CONTECT AND ACHIEVEMENTS	PROVE & CONTACT WAY
1.				
2.				
3.				

~ **/ SOCIAL INTERNSHIP( FROM CURRENT TO FORMER ONES )**

FROM...TO...	COMPANY	DEPARTMENT POSITION	MAIN WORK CONTECT AND ACHIEVEMENTS	PROVE & CONTACT WAY
1.				
2.				
3.				

**/ GROWING EXPERIENCE**

Please describe an event that impress you most in your growing experience, and why?

/ I Agree That:

1. , / All the information I provided is correct to the best of my knowledge. I accept that deliberately providing false information could result in my dismissal.
2. / My health status satisfy the work requirements I am applying for.
3. / Spang can do reference check on the information I provided in this sheet for further employment.

/SIGNATURE: \_\_\_\_\_

/DATE: \_\_\_\_\_