



Accredited Certification International Limited
APPLICATION FORM

Applied Position: _____

I. PERSONAL PARTICULARS

Name: _____ (English) _____ (中文)	
Mobile Phone: _____	Other Contact Number: _____
Fax: _____	Email: _____
HKID No.: _____	Date of Birth: _____
Address: _____	

II. QUALIFICATION

Period(Mon/Yr)		Name of School/College/University/Institute	Qual./Cert./Degree	Subjects/Field
From	To			

III. PROFESSIONAL QUALIFICATION

Date of Award	Type of Award	Awarding or Registration Institution



Accredited Certification International Limited

IV. EMPLOYMENT HISTORY (Please complete in chronological order)

Period (Mon/Yr)		Name of Company	Nature of Business	Last Position
From	To			

V. OTHER SKILLS

Languages :	
Special Skills :	

VI. REMUNERATION

Current Salary:		Expected Salary:	
-----------------	--	------------------	--

I hereby confirm that the information supplied above is true.

Date: _____

Signature: _____