



Gross monthly income for last position	
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Language	Speaking			Writing			Reading		
	Good	Fair	Poor	Good	Fair	Poor	Good	Fair	Poor
Arabic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you ever been employed by Saudi Basic Industries Corporation (SABIC) or any of its Affiliates.	<input type="checkbox"/> Yes	No <input type="checkbox"/>
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If Yes , indicate :

Name of Employer \_\_\_\_\_

Period of employment from \_\_\_\_\_ to \_\_\_\_\_ Reason for separation \_\_\_\_\_

I hereby authorize you to get reports from my present /previous employers.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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List the contact details of two persons whom we may refer to for more information regarding your work experience

Name	Telephone Number	E-mail Address	Job Title

**Permanent Address:**

Home Phone Number	Office Phone Number	Mobile Phone Number	E-mail Address

Postal Address

\_\_\_\_\_

Before signing, Please read the following statement:

I certify that all information given by me is true, accurate and complete. I understand that falsification, misrepresentation or omission of facts on this application (or any other documents) will be cause for denial of employment or immediate termination of employment if already employed regardless of when or how discovered.

I understand that in being considered as a candidate for employment, that such consideration does not constitute a commitment on the part of the company to employ me. I also understand that I am obligated to meet all the necessary company requirements and tests before any such commitment can be made.

Applicant's Signature :		Date:	
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