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(Signature)

COMPUTER NO. ....

EMPLOYMENT APPLICATION

SULTAN QABOOS UNIVERSITY HOSPITAL ★

Please print in block capitals or type all information

1. TITLE OF POSITION APPLIED FOR ··

    DATE OF THIS APPLICATION: .... DATE AVAILABLE FOR EMPLOYMENT: ....

    e-mail address....................................

2. PERSONAL DETAILS

    FULL NAME ···

    (ARABIC)   (INCLUDING TRIBAL AND FAMILY NAME)

    FULL NAME (Dr.,Mr.,Mrs.,Miss,Ms) ....

    (NON ARABIC)   FAMILY NAME   FORENAMES

    MAIDEN NAME ....

    QUALIFICATIONS ....

    PRESENT POSITION AND TITLE ....

    NAME & ADDRESS OF EMPLOYER ....

    ....

    ....

    PRESENT ADDRESS ....

    .... PHONE ....

    PERMANENT ADDRESS ....

    ....

    .... PHONE ....

    DATE OF BIRTH .... PLACE OF BIRTH ....

    NATIONALITY .... NATIONALITY AT BIRTH ....

    SEX .... RELIGION ....

    PASSPORT DETAILS: NUMBER .... DATE OF ISSUE ....

    PLACE OF ISSUE .... DATE OF EXPIRY ....

    MARITAL STATUS .... NUMBER OF CHILDREN ....

    SPOUSE: FULL NAME ....

        NATIONALITY .... NATIONALITY AT BIRTH ....

        DATE AND PLACE OF BIRTH ....

        RELIGION .... OCCUPATION ....

        Name and Address of Employer............

★ P.O. Box 38 Al-Khod, Muscat 123, Muscat, Sultanate of Oman.   ....

                                           ....

Note: If additional pages or attachments are required, please attach them and identify each with the appropriate section of the application. You may supplement this application with an already prepared Curriculum Vitae, but please include all essential details on this form.

DETAILS OF DEPENDENT CHILDREN: (17 years or less)

NAME	DATE OF BIRTH	SEX	HEALTH★
....	....	....	....
....	....	....	....
....	....	....	....
....	....	....	....

Are you suffering from any physical or mental illness ?   YES .... NO ....

If YES please provide essential details ....

....

★ Health Certificates issued by a physician for the applicant and all accompanying dependents will be required prior to the signing of the Employment Contract.

Have you ever been convicted, fined or imprisoned for the violation of any law (excluding minor traffic violations) ?

YES .... NO ....

If YES please give full particulars in each case: ....

....

....

3. EDUCATIONAL BACKGROUND:

List in chronological order all academic degrees and professional qualifications. Where applicable, attach certified copies of official transcripts or records of courses (subjects) taken as part of each degree or professional qualification attained. All documents are to be translated into English.

DATES ATTENDING (From - To)	DEGREES,CERTIFICATES, DIPLOMAS,PROFESSIONAL OR OTHER QUALIFICATIONS	NAME & ADDRESS OF THE INSTITUTION,CENTRE,INSTITUTE,ETC.
....	....	....
....	....	....
....	....	....
....	....	....
....	....	....
....	....	....
....	....	....
....	....	....

Where official transcripts of courses or programmes are not available, please attach a list of major and supporting courses (subjects) taken, grades where applicable, credits or hours for each course (subject) and other information, where applicable, relevant to your academic performance and programme emphasis for each academic degree or professional qualification attained.

4. EMPLOYMENT HISTORY:

Please list all major professional posts or positions held in chronological order.

DATES (from / to)	POSITION,TITLE OR RANK	NAME & ADDRESS OF EMPLOYER	DESCRIBE BRIEFLY ★ ★
....	....	....	....
....	....	....	....
....	....	....	....
....	....	....	....
....	....	....	....
....	....	....	....
....	....	....	....
....	....	....	....

★★ Please describe in greater detail the major duties and responsibilities of your present position or of the position most relevant to that for which you are now applying:

....

....

5. Other experiences & information of relevance to this position (teaching, research, consultancies, community & social activities, etc).

6. Where applicable, please list publications and major papers given.

7. Where applicable, list memberships in relevant organizations and Awards and Distinctions (chronological order).

NAMES OF ORGANIZATION OR AWARD	DATE(s)	POST OR OFFICES HELD, OR DESCRIBE AWARD

8. LANGUAGE PROFICIENCY : MOTHER LANGUAGE ★ : ....

OTHER LANGUAGES Describe proficiency as Excellent, Very Good, Good, Fair

LANGUAGE	WRITTEN	SPOKEN
....	....	....
....	....	....
....	....	....

★ If English is not your mother language, you may be required to pass oral and written tests in English.

9. REFERENCES :

Please provide names, addresses and titles (where appropriate) of 3 persons (not related to you) who you feel are best able to evaluate your character and qualifications for this position.

Your application will not be complete without references being provided and the University reserves the right to obtain additional references.

NAME OF REFEREE	TITLE OR POST HELD	ADDRESS

10. I hereby declare that the information provided in this application form is true, complete and correct to the best of my knowledge and belief. I understand that any misrepresentation or material omission made on the application form or any document requested by the University renders an employee of the University liable to termination of contract or dismissal. It is further understood that this application does not constitute any obligation either on my part or on the part of Sultan Qaboos University, and that the information contained herein will be treated in the strictest confidence.

....
Signature

....
Date