

BETHLEHEM UNIVERSITY

Office of Personnel Management
P.O. Box 9 Bethlehem – Palestine
Tel: + 972-2-2741241
Fax: + 972-2-2744440



جامعة بيت لحم

مكتب شؤون الموظفين

هاتف: + 972-2-2741241

فاكس: + 972-2-2744440

Sub-Contract

JOB APPLICATION FORM

Application for Position of: _____

Date Received

Application No.

The following documents should be attached to the application form:

1. A certified copy of the highest educational degree, where applicable.
2. Copy of college transcript, where applicable.
3. Certificates of experience.
4. Copy of Birth Certificate and of Passport and Identity Card.
5. Curriculum Vitae.

PERSONAL INFORMATION

Name _____ (Four Names as in Passport or in Identity Card)

Date of Birth _____ / _____ / _____ Place of Birth _____
Day Month Year

Nationality _____ Citizenship _____

I.D. Card No. _____ Issued at _____

Passport No. _____ Issued at _____

Social Status: Married _____ Single _____ Widow _____ Divorced _____ Religious _____

Religion _____ Sect _____

Address _____

Tel. No. (Home) _____ (Work) _____ Mobile _____

E-Mail Address _____

Spouse's Name _____ Working _____ Non Working _____

Spouse's Job _____ Place _____

No. of Children _____

Name

Date of Birth

General Health Condition: Very Good _____ Good _____ Fair _____

Health Problems, if any _____

JOB INTEREST

Other Positions for which Qualified _____

Date Available _____

EDUCATION

	Institution	Degree Earned	Year Graduated
Primary Education	_____	_____	_____
Secondary	_____	_____	_____
Vocational	_____	_____	_____
College	_____	_____	_____
University	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Specialization/Major _____

REFERENCES

List the names of three references that know you well. Do not list relatives or close friends.

Name	Address/Tel. No.	Occupation
_____	_____	_____
_____	_____	_____
_____	_____	_____

The facts set forth above in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal.

Signature of Applicant _____ Date _____

FOR UNIVERSITY USE ONLY. DO NOT WRITE IN THIS SPACE.

Name of Successful Candidate _____

Job Title _____ Department _____

Immediate Supervisor -----

Interviewed by:

Comments:

Recommendation to the Vice Chancellor:

Status: Full Time _____ Part Time _____ Daily _____ Category _____

Rank: _____ Step _____ Equivalent (JD) _____

Allowances _____

_____ Total Salary _____ Daily Wage _____

Special Stipulations _____

Starting Date of Employment _____ (a 3-month probationary contract)

Director of Personnel Management _____ Date _____

Approval of Vice Chancellor _____ Date _____