



ASIAN REINSURANCE CORPORATION

**Application for the post of
Administrative Officer
(Reinsurance Technical Department)**

*Affix
Passport size
Photograph*

1. Name of Applicant : _____

2. Nationality : _____ 3. Sex : _____

4. Date of birth : _____

5. Address for communications :

Email :

Fax No. :

6. a) Office Address : _____
_____ T.P. No. _____

b) Home Address : _____
_____ Mobile No. _____

7. Marital status : _____

8. List of dependents : (spouse & children under 21 years)

Name

Age

Relationship

9. State of health. Please indicate if you are suffering from any disability or undergoing treatment currently for any ailment.

10. Have you ever been arrested, indicted or summoned into court as a defendant in any criminal proceedings or been convicted, fined or imprisoned for the violation of any law (excluding minor traffic violations)? If so, please give full particulars.

11. Knowledge of languages :

Mother tongue :

Other languages	Read		Write		Speak	
	Easily	Not Easily	Easily	Not Easily	Easily	Not Easily

12. Educational Qualifications :

A - Schools (from age 14 onwards)

Name of School	City, Country	Attendance Period		Certificates or Diploma obtained
		From	To	

B - University or equivalent

Name of institution	City, Country	Attendance Period		Subjects Studied	Degree and academic distinctions obtained
		From	To		

C - Technical / Professional Qualification

Name of institution and city and country	Attendance or Study Period		Subjects Studied	Diploma or Certificate obtained
	From	To		

D - Training Courses attended

Name of institution and city and country	Attendance or Study Period		Subjects Studied
	From	To	

13. A - Employment record : Starting with present post, please list in reverse order.

A. PRESENT POST : Name of employer :
 Title of Post :
 Gross salary :

FROM	TO	Description of duties and responsibilities	

B. PREVIOUS POSTS : Name of employer :

Title of Post :

Gross salary :

FROM	TO	Description of duties and responsibilities	Reason for leaving

14. A - Information to demonstrate experience in following fields :

(i) Treaty/Facultative Reinsurance

(ii) Underwriting and Claims

(iii) Computer Proficiency

B - Any other information you wish to submit in support of your application.

15. References: List three persons not related to you, who are familiar with your character and qualifications

FULL NAME	FULL ADDRESS	BUSINESS OR OCCUPATION
1.		
2.		
3.		

16. Certificate by applicant :

I certify that the statements made by me in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief. I understand that any misrepresentation or material omission made on a Personal History form or other document requested by the Corporation renders a staff member of the Corporation liable to termination or dismissal.

Place and date :

Signature