

# EMPLOYEE PROFILE FORM

Form No.: HR-R-02 Issue No.: 2010



**Entity:** **TELEDIRECT TELECOMMERCE SDN BHD**

Full Name : \_\_\_\_\_  
First Name : \_\_\_\_\_ Home Country Address : \_\_\_\_\_  
Middle Name : \_\_\_\_\_  
Last Name : \_\_\_\_\_  
Date of Birth : \_\_\_\_\_  
Country of Birth : \_\_\_\_\_  
Gender : Female / Male Residential Address : \_\_\_\_\_  
Nationality : \_\_\_\_\_  
Ethnicity : \_\_\_\_\_  
Religion : \_\_\_\_\_  
Marital Status : Single / Married / Divorced  
Contact Email Address : \_\_\_\_\_  
Mobile Number : \_\_\_\_\_

**Emergency Contact** *(Immediate family members only)*

**Name (as in I.C.)** : \_\_\_\_\_  
Mobile Number : \_\_\_\_\_  
Relationship : \_\_\_\_\_

**Details of Spouse / Dependents**

**Name (as in I.C.)** : \_\_\_\_\_  
I.C. No. / Passport No. : \_\_\_\_\_ Beneficiary : Yes / No  
Spouse Status : Working / Not Working Beneficiary Percentages : \_\_\_\_\_  
Mobile Number : \_\_\_\_\_  
Date of Birth : \_\_\_\_\_

**Details of Children**

Full Name	IC No	Date of Birth	Studying / Working

I hereby certify that the above information given is correct.

\_\_\_\_\_  
( )

Date: