

Application as ITEES Consultant

Thank you for your interest as part of ITEES' family of consultants in providing TVET consultancy and training services, transforming the lives of people internationally. Please take a few minutes to furnish the details of your personal particulars, qualifications and work experience as requested for our consideration of job assignments that best fit your profile. By filling up this form, you hereby agree that ITEES may collect, obtain, store and process your personal data that you provide in this form for the purpose as ITEES consultant.

Part 1 of 3: Personal Particulars			
Family Name:		Given Name:	
Gender:		Date of Birth: (DD-MMM-YYYY)	
Nationality:		Race:	
Religion:		Marital Status:	
Mobile No:		Office No:	
Email Address:			
Part 2 of 3: Applicant Details			
(A) Highest Academic Qualification			
1	Name of Institution		
2	Country of Study		
3	Course of Study		
4	Graduation Year		
5	Qualification Attained		
(B) Proficiencies			
1	Computer Proficiency <i>Tick all applicable options</i>	<input type="checkbox"/> Microsoft Word <input type="checkbox"/> Google Docs <input type="checkbox"/> Microsoft PowerPoint <input type="checkbox"/> Microsoft Excel <input type="checkbox"/> AutoCAD <input type="checkbox"/> Photoshop <input type="checkbox"/> Microsoft Outlook <input type="checkbox"/> Others (Please specify): _____	
2	Language Proficiency <i>Tick all applicable options</i>	<input type="checkbox"/> English <input type="checkbox"/> Mandarin Chinese <input type="checkbox"/> Hindi <input type="checkbox"/> Bahasa Melayu <input type="checkbox"/> Bahasa Indonesia <input type="checkbox"/> German <input type="checkbox"/> French <input type="checkbox"/> Russian <input type="checkbox"/> Spanish <input type="checkbox"/> Others (Please specify): _____	
(C) Current Profession Status <i>Please tick one only</i>			
1	<input type="checkbox"/> Current ITE Staff Please indicate your year of employment at ITE (YYYY): _____ <i>Kindly note that respective HOE will be informed of staff's interests to undertake ITEES' assignments (if any)</i>		
2	<input type="checkbox"/> Resigned from ITE Please indicate your last day of employment at ITE (DD-MM-YYYY): _____		
3	<input type="checkbox"/> Retired ITE Staff Please indicate your year of retirement from ITE (YYYY): _____		
4	<input type="checkbox"/> External Staff Please indicate your total years of experience: _____		

(D) Areas of Expertise	
Main Area - Tick all applicable options	Sub Areas - To fill/ complete
1. <input type="checkbox"/> Applied and Health Sciences	
2. <input type="checkbox"/> Business and Services	
3. <input type="checkbox"/> Design and Media	
4. <input type="checkbox"/> Engineering	
5. <input type="checkbox"/> Electronics and Info-Comm Technology	
6. <input type="checkbox"/> Hospitality	
7. <input type="checkbox"/> Life Skills	
8. <input type="checkbox"/> Quality Assurance – TVET Excellence	
9. <input type="checkbox"/> Train-The-Trainer (Technical) Programmes	
10. <input type="checkbox"/> Train-The-Trainer (Pedagogy) Programmes	
11. <input type="checkbox"/> TVET Leadership, Institute Management	
12. <input type="checkbox"/> Emerging Technology	
13. <input type="checkbox"/> Others (Please Specify, if none of the above)	

Part 3 of 3: Declaration

I declare that the information given by me in this application form and any additional documents attached are true, complete and accurate to the best of my knowledge and that I consent to the collection, use and/or disclosure by ITE Education Services of my personal details above to contact and assist me with my application.

Name of Applicant	Signature	Date