

# APPLICATION FORM FOR TRANSFER / CAREER MOVE

Note : For Career Move Purpose, please fill up Part A, B, C and D (Compulsory)



<b>POSITION APPLIED</b>	<b>CAREER MOVE VOLUME NO.</b>
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## A. STAFF DETAILS

Name	Staff No.	
BG/FG	Personal Grade	
BA/FA	Date Joined	
Section / Branch	Position Held	
Mobile Contact No.	Gender	
Highest Qualification	Marital Status	

Names of Immediate Family (Officer's Spouse, Children, Parents, Parents-in-law, Siblings and Grandparents) / Immediate Relatives (Step Siblings, Spouse of Siblings of the Employees) / Relatives in RHB Banking Group.  
 (Should You Have More Than 2 Immediate Family / Relatives, Please List it Down on a Separate Sheet of Paper)

Name	Position	Relationship	RHB Dept / Branch
.....	.....	.....	.....
.....	.....	.....	.....

Do you have any Business Interest, Directorship, Distributorship, Political Involvement, Other Part-Time Employment(s) or act as an Agent or Guarantor of any Companies ?	Yes / No
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## B. EXPERIENCE IN RHB BANK \*\*Please detail out your experience in the Bank

i.)	Duration	Division/ Dept/ Branch	Nature of Job <span style="color: blue;">**Please be specific</span>
	From To		
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

## ii.) This section is to be completed by staff who has branch operations experience \*\*Please complete where applicable

Area of Branch Operations	Duration	
	From	To
*** CURRENT ACCOUNT / SAVINGS ACCOUNT / FIXED DEPOSIT ACCOUNT	.....	.....
REMITTANCES	.....	.....
BOOK-KEEPING / STATISTICS	.....	.....
BILLS	.....	.....
ATM / CREDIT CARD	.....	.....
CREDIT	.....	.....
CLEARING	.....	.....
SHARE TRADING	.....	.....
Others, please specify	.....	.....
<span style="color: blue;">***Please cancel wherever not applicable</span>		

## C. REASONS FOR APPLICATION FOR TRANSFER AND APPLICANT'S DECLARATION

Reason for application : .....

I ..... hereby declare that all the particulars, hereinbefore stated by me are true and accurate to the best of my knowledge and belief. I understand that I will be subjected to disqualification or immediate dismissal if any particulars are untrue.

Signature of Applicant : ..... Date : .....

## D. COMMENTS BY HEAD OF DIVISION/ DEPARTMENT/ BRANCH MANAGER

Application is supported / Not Supported \*\*\*Please cancel where appropriate

.....

Signature of Head of Division/ Dept / Branch Manager : ..... Date : .....

## E. FOR HR'S USE ONLY

Date Received	Action By	
<b>Comments / Action Taken :</b>		
.....		
.....		
.....		