Please attach a copy of your most recent CV / resume. Please include any volunteering history as well. If relevant, also attach samples of your work or portfolio. (Samples will not be returned, so we recommend that you do not give us original copies.)

| **1. Personal Information** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **Full Name:** | | | **Date of Birth:** | | |
| **Temporary Address:** | | | **Permanent Address:** | | |
| **Zone:** | **District:** | | | | **VDC/ Municipality:** |
| **Contact Number** | **Guardian's Name and number** | | | | **Email Address** |
| **Marital status:** | | | | | |
| **Education :** | | | | | |
| **2. Employment Desired** | | | | | |
| * Full time ( 10-6 ) | | * Part time ( 1-6 ) | | * Full or part time ( 24 hrs ) | |
| **Position Applied For:** | | | | | |
| **Salary Designed:** | | | | | |
| **Citizenship ID:** | | | | | |
| **Previous job:** | | | | | |

| **3. General Application Questions** |
| --- |
| **1. Give short introduction about you:** |
| **2. How did you hear about Arise And Shine Nepal?** |
| **3. Why are you interested in working at Arise And Shine Nepal?** |
| **4. Have you done any job before? If any, share with us some of your experiences?** |
| **5. What do you think you could contribute to the Arise And Shine Nepal team and mission?** |
| **6. What do you think would be most challenging for you working along with this organization?** |
| **7. What are your strengths and weaknesses?** |

| **8. Do you have any physical, mental, or sensory health conditions which might affect work performance, your ability to live and work autonomously in Nepal, or which should be considered in job placement? If so, please explain.** |
| --- |
| **9. Please explain how you cope with stressful situations.** |
| **10. Describe your flexibility, ability to handle change and ambiguity.** |

I confirm that all of the above information is true and accurate to the best of my knowledge. I understand that if my application is incomplete or inaccurate, I will automatically be disqualified from consideration for ANS employment.

Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

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Full Name