



APPLICATION FORM TO ATTEND CERTIFICATE IN PARK GUIDING COURSE

Venue:.....

Date:.....

Recent Passport-size color photograph of applicant (2 copies)

A. APPLICANT'S PARTICULARS

1. Name:

2. MyKad/Passport No.: 3. Birth place:

4. Tel (Home): 5. Cellphone:

6. E-mail: 7. Sex:

8. Race: 9. Age: 10. Marital status:

11. Citizenship:

12. Residential address:

.....

.....

Postcode: Town: State:

13. Occupation:

14. Current Employer's name and address:.....

.....

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Postcode: Town: State:

15. Academic qualifications: (Enclose **certified** photocopy of certificate/ diploma/ degree)

Certificate/Diploma/Degree	Year	School/College/Institute/University

16. Language Proficiency

a) English

() Excellent () Good () Fair () Poor

b) Bahasa Malaysia

() Excellent () Good () Fair () Poor

c) Others (please indicate)

..... () Excellent () Good () Fair () Poor

..... () Excellent () Good () Fair () Poor

17. Please state any Tourist Guide Training Course that you have attended:
(Certified copies of Certificates of Attendance or other proofs to be attached)

Course/Training	Year	Organised by:

18. Are you a Malaysian Red Crescent certified First-Aider?

() Yes () No

If yes, when does the validity of your certificate expire?.....

19. Have you been licensed as a tourist guide?

() Yes () No

- (a) If licensed, what is your License No.?.....
 - (b) Type of license: Yellow Badge/Blue Badge/Localised Nature Guide*
 - (c) Date of issuance of License
 - (d) Date of expiry of License:
 - (e) Approximate number of guiding assignments/activities done per year
- (* Delete where not applicable)

20. Do you have a Provisional Park Guide Licence?

() Yes () No

- (a) If Yes, what is your Licence No.?
- (b) Date of issuance of Licence
- (c) Date of expiry of Licence.....

21. If you belong to any Tour Guides Association, please give details:

- i) Name of Association:
- ii) Date of joining the Association:
- iii) Membership number.....
- iv) Position held in the Association:

22. Employment Records as a Tourist Guide

(Please use separate sheet of paper if space below is not sufficient.)

Date	Employer's Name & Address

Please attach testimonial from each employer.

B. DECLARATION

I,.....,holder of MyKad/Passport No.....hereby declare that all the information given above are correct and true. I also understand that if any information given is found to be false, my application could be rejected, or in the event that the discovery of false information after registration, I would be asked to leave the course and all fees paid will be forfeited.

Signature.....

Date.....

CHECKLIST BEFORE SENDING IN APPLICATION

1. Certified true copy of applicant's MyKad/Passport []
2. Two (2) copies recent passport-size color photographs of applicant []
3. One piece 30 sen postage stamp []
4. Certified true copies of academic qualifications or vocational certificates []
5. Testimonials from previous employers []
6. Name of course you are applying for written on the top left-hand corner of envelope []
7. Name and address of receiver of your application correct []

WHERE TO SEND THE DULY FILLED APPLICATION FORM

**Ag. Deputy General Manager
Protected Areas & Biodiversity Conservation Division
Sarawak Forestry Corporation Sdn Bhd
Lot 218, KCLD, Jalan Tapang
Kota Sentosa
93250 KUCHING**

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1. Date and time of receipt of application:

2. Name of receiving officer:.....

3. Decision of Selection Panel:

Application is approved.

Application is not approved.

4. Signature of Selection Panel Chairman.....

Date:.....