

14. LIST ALL TRAINING RECEIVED					DO NOT WRITE IN THIS SPACE
Name of Training/Seminar	Dates	Held in	Sponsored by	Type of award obtained	

15. SPECIAL SKILLS, QUALIFICATIONS, ETC.			
Category	No.	W.P.M.	Type of Machine/Program
Typing			
Shorthand			
Computers			
Others			

PART C – EMPLOYMENT RECORD (Start with present or most recent and work back)			
16. Name of Employer		Contact Information	Type of Business
Name of Immediate Supervisor		Supervisor's Title, Telephone number & email address	
Starting date	Final date	Pay rate	Hours worked per week
Duties			
17. Name of Employer		Contact Information	Type of Business
Name of Immediate Supervisor		Supervisor's Title, Telephone number & email address	
Starting date	Final date	Pay rate	Hours worked per week
Duties			
18. Name of Employer		Contact Information	Type of Business
Name of Immediate Supervisor		Supervisor's Title, Telephone number & email address	
Starting date	Final date	Pay rate	Hours worked per week
Duties			

