

**ASSESSMENT FORM FOR OUTDOORS SALESMAN.**

FULL NAME: \_\_\_\_\_

NATIONALITY: \_\_\_\_\_

CPR NO: \_\_\_\_\_

PERIOD IN BAHRAIN: \_\_\_\_\_

DRIVING LICENSE: YES  NO

DRIVING EXPERIENCE IN BAHRAIN \_\_\_\_\_

VISA STATUS \_\_\_\_\_ VISA VALID TILL \_\_\_\_\_

SPOKEN LANGUAGES \_\_\_\_\_

CURRENT SALARY: \_\_\_\_\_ EXPECTED SALARY \_\_\_\_\_

ARE YOU WILLING TO CHANGE YOUR SPONSORSHIP

YES  NO

WOULD YOU BE ABLE TO WORK IN CASE OF SPONSORSHIP NOT PROVIDED

YES  NO

ARE YOU REGISTERED WITH LMRA YES NO

I hereby agree that the above mentioned, details are accurate and correct to my knowledge

SIGNED \_\_\_\_\_ DATED: \_\_\_\_\_

Please send us the complete form with your photograph on [millcomp@batelco.com.bh](mailto:millcomp@batelco.com.bh) or Fax us on 17228081

