

# Employment Application Form

Thank you for your interest in our Company!

Please complete the following and return by email to [applications@agservices.ag](mailto:applications@agservices.ag).

The information provided must be factual and verifiable.

The information requested is for the sole purpose of assessing your suitability for employment.

Information is stored as confidential and kept on file as permitted or required by local law.

SECTION I APPLICANT INFORMATION				
Date				
Last Name		First Name		
Address (Permanent)				
Date of birth				
Tel No. 1		Tel No. 2		
Email				
Have we interviewed you before?	YES	NO	If Yes, when?	
How did you hear about us?				
<i>*Please note: only a few attempts will be made to reach an applicant using the numbers provide above</i>				

SECTION II LEGAL INFORMATION				
1	Country of nationality			
2	Country of birth			
3	Do you have dual citizenship?	YES	NO	
	List all countries in which you hold citizenship	1) 2)	3) 4)	
4	If not Antiguan, provide details about work ability e.g. <i>are you eligible for a work permit?</i>			
	Have you ever applied for a work permit?	YES	NO	
	Was it approved?	YES	NO	
	How long have you lived in Antigua?			
5	Do you have a valid Passport?	YES	NO	<i>Disclaimer – Employment will not be offered to anyone with an expired passport.</i>
6	Have you ever been charged for any misdemeanours or felonies?	YES	NO	
	If Yes, explain			

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SECTION III EMPLOYMENT HISTORY						
<i>*Please provide information from most recent to oldest</i>						
1	Company Name		Start Date		End Date	
	Role/Position					
	Responsibilities					
	Reason for leaving					
2	Company Name		Start Date		End Date	
	Role/Position					
	Responsibilities					
	Reason for leaving					
3	Company Name		Start Date		End Date	
	Role/Position					
	Responsibilities					
	Reason for leaving					
4	Company Name		Start Date		End Date	
	Role/Position					
	Responsibilities					
	Reason for leaving					

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SECTION IV REQUIRED INFORMATION										
<i>*Please answer all questions truthfully</i>										
1	The business is a 24/7 operation. Can you work on a shift basis?					YES		NO		
2	Do you have access to reliable transportation?					YES		NO		
3	Do you have more than one (1) year experience in Customer Service?					YES		NO		
4	Do you have experience communicating with customers using the channels below?									
	a) Telephone YES NO			b) Live Chat YES NO			c) Email YES NO			
5	Do you have experience in the below?									
	a) Poker YES NO			b) Casino YES NO			c) Sportsbook YES NO			
6	How would you rate your computer proficiency?				Advance		Intermediate		Basic	
7	How many words do you type per minute?									
8	Are you proficient in Microsoft Office?					YES		NO		
	Rate your proficiency in Word				Advance		Intermediate		Basic	
	Rate your proficiency in Excel				Advance		Intermediate		Basic	
	Rate your proficiency in Outlook				Advance		Intermediate		Basic	
9	Do you have a high school diploma? If no, provide additional information in Section 6					YES		NO		
10	CXC Grade If no, provide additional information in Section 6				English – Grade 1 - 2? YES NO		Math – Grade 1 - 3? YES NO			
11	Are you related to anyone employed at this Company?					YES		NO		
	If yes, provide more information?									
12	Do you know anyone at employed by this Company?					YES		NO		
	If yes, provide employee name									
	Employee Full Name					Employee Full Name				
13	Do you speak any foreign language?					YES		NO		
	If yes, state language									
15	Are you currently employed?					YES		NO		
	If yes, provide reason for wanting to leave									
	May we contact your present employer?					YES		NO		
	If no, why?									
16	Expected salary range		XCD							

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SECTION V EDUCATION & QUALIFICATION						
No.	Institution Name(s)	Qualification Obtained	Subject/Courses	Exam Results (Grade)	Start Date	End Date
1						
2						
3						
4						
5						

*\*High School, College, University and/or Occupational Training or Qualification.*  
*\*Please be prepared to present originals of certificates, grades etc.*

SECTION VI PROFESSIONAL REFERENCES		
Reference 1 details	Full Name	
	Address	
	Role	
	Tel no. 1	
	Tel no. 2	
	Relationship	
Reference 2 details	Full Name	
	Address	
	Role	
	Tel no. 1	
	Tel no. 2	
	Relationship	

*\*As far as possible, please give details for references not immediately related to you.*

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## SECTION VII HOBBIES & INTEREST

### What position are you applying for?

Customer Support Representative	
Technical Support Representative	
Bet Manager	
Payment Support Representative	
Risk Support Representative	
Accounts Representative	
Human Resources	
Training and Development	
Quality Assurance Coordinator	
Other – Not specified	

### DISCLAIMER & SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my termination.

Signature		Date	
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