

Employee Information Form

PERSONAL INFORMATION

Full Name: **Goh** **Wern Ferng**
Last First Middle Name (optional)

Preferred name: **Wern** Birthday (dd/mm/yy): **14/06/94**

Address: **Jurong West Street 42 Blk 432 #12-572**
Street Address Apartment/Unit #

Singapore **640432**
City Postal Code

Home Phone: **68961630** Mobile Phone: **98165971**

Personal Email: Wernferng.goh@hotmail.com NRIC/FIN (expiry date if any): **S9420679J**

Dietary restrictions or Allergies: **NIL** T-Shirt Size: **M**

Gender (M/F): **M** Marital Status: **Single**

FAMILY INFORMATION

Spouse Name: _____
Last Name First Name

Primary Phone: _____

Relationship: _____

Child Name: _____
Last Name First Name

Gender (M/F): _____ Birthday (dd/mm/yy): _____

Child Name: _____
Last Name First Name

Gender (M/F): _____ Birthday (dd/mm/yy): _____

Child Name: _____
Last Name First Name

Gender (M/F): _____ Birthday (dd/mm/yy): _____



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EMERGENCY CONTACTS

CONTACT 1: **Goh** **Kin Miang**
Last Name *First Name*

Primary Phone: **96232712** Alternate Phone: _____

Relationship: **Father**

CONTACT 2: **Lim** **Bee Hwa**
Last Name *First Name*

Primary Phone: **96746384** Alternate Phone: _____

Relationship: **Mother**

BANKING INFORMATION

Name of Bank: **POSB**

Name of Account Holder: **Goh Wern Ferng** Bank Account No: **068540810**

Branch Code: **7171**

JOB INFORMATION

Job Title: **Product Manager** Employee ID: _____

Department: **Software Operations** Reporting HOD: **Daryl Pat**

Start Date: **04/05/20** Status (FT/PT): **FT**