

EMPLOYMENT APPLICATION FORM

REPUBLIC OF KENYA

MANDERA COUNTY GOVERNMENT



OFFICE OF THE COUNTY PUBLIC SERVICE BOARD; P.O. BOX 356-70300, MANDERA

Please complete this form in **BLOCK** letters as appropriate and submit to the Secretary, Mander County Public Service Board Public, P.O. BOX 356-70300 MANDERA, KENYA

(Attach copies of your academics, Professional, Identity Card and Chapter Six Clearance certificates)

1. Vacancy Applied for

Vacancy/Post:
Vacancy No:
Department:

2. Personal Details of Applicant

Name of applicant: Title:
(Prof/Dr/Mr/Mrs/Miss/Ms/Rev)

Date of Birth: Gender: Male Female.....
(Dd-mm-yyyy)

Nationality:.....ID No/Passport No.....

Ethnicity.....Sub Clan.....

Address: Postal code.....

County :sub -County.....

Ward.....

Telephone:.....Mobile:.....E-mail.....

Address:.....'

Alternative contact Person.....Mobile.....

3. Current Employment Details (where applicable)

			ent Requests for these)

6. Other Relevant Courses & Training attended/ Registration/Membership to Professional Bodies

Also indicate your membership status to relevant professional bodies as required in the advertisement.

Course attended/ Registration/membership details	Year attended/Registered for	Institution/ Body	Registering

7. Relevant courses and training attended lasting more than one (1) week

Year	University/College /Institution	Name of Course	Details and duration

8. Employment details

Give details of your employment History starting with the current employment

Position /Rank (start with current)	Period From –To	Employer	Ministry/Department/institution /organization

9. Briefly state your current duties, responsibilities and assignments (if any)

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10. Give details of your abilities, skills and experience which you consider relevant to the position applied for

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11. Personal References (for new entrants into the civil service)

The names of distinguished persons should not be used unless they really know you well; the names of relatives or of those from whom you send testimonials should not be used. The names of members or staff of the County Public Service Board of Mandera should also not be used.

1. Full Name:

Address:Mobile No:.....E-mail.....

Occupation:.....

Period for which he/she has known you:.....

2. Full Name:

Address:Mobile No:.....E-mail.....

Occupation:.....

Period for which he/she has known you:.....

12. For Serving Officers Only

Department/County/other Institutions.....Duty station.....employment no.....

Present substantive post.....

Job group.....Date of current appointment(dd-mm-.....

Indicate your last Performance Appraisal rating.....%

13. Declaration

I hereby certify to the best of my knowledge that the particulars given on this form are correct and I understand that any incorrect information may lead to **disqualification and that Mandera County Public Service Board may take legal action against me without further reference.**

Date:
(dd-mm-yyyy)

Signature of the Applicant.....