

## NATIONAL COUNCIL FOR PERSONS WITH DISABILITIES

## APPLICATION FOR EMPLOYMENT FORM

Please download and complete all sections of this form as appropriate in **BLOCK** letters and post or deliver at our offices on Waiyaki Way, Westlands opposite ABC Place P. O. Box 66577 - 00800 Nairobi. Please attach copies of certificates and testimonials. (No application will be processed without a dully completed form)

1. Vacancy Applied For			
Position:			
rosition			
NCPWD Job Grade:			
2. Personal Details of the Applicant			
Name:			
(Surname)	First Name	Other Name(s):	(Prof/Dr/Mr/Mrs/Miss/Ms/Rev)
Date of BirthID No:	······································	KRA PIN. NO	Gender: Male Female
Nationality:	Ethnicity	Home County:	
Sub County	Co	onstituency:	
Postal Address:		Town/City	y:
Telephone No:	Mobile No:	E-mail address:	
Name of alternative contact person:		Telephone No:	
Are you living with a disability? Yes	No 🗀		
If yes, give; (i) Details/Nature of Disability:			
(ii) Details of Registration with the National C	Council for People with Disa	abilities (Registration No. and date)	
3. Applicants in the National Council fo	or Persons with Disabil	lities only	
Department:	Station:		
Personal/Employment No:	Present Substat	ntive Post:	
Job group/Scale/Grade:	Date of Current Appointn	nent (dd-mm-yyyy)	
Upgraded post (where applicable):		effective date of previous appoint	
On Secondment (where applicable): Organisation:		Designation:	(dd-mm-yyyy)  Job Group/Grade:
Terms of Service: Permanent	& Pensionable	Other, Please spe Contract	cify:

ou ever been cor	victed of any criminal offe	ence or a subje	ect of probation	on order? Yes	No 🖂		
	fence, the year and duratio						
		1 6		V N	_		
	missed or otherwise remov			Yes No			
State reason (s) f	or dismissal/removal				eff	ective date	(dd-mm-yyyy)
	nformation will not necess	sarily debar a	n applicant f	from employment in the	Public Service. Eac	ch case will b	e
ered on its own n	nerit)						
_		_	_			_	_
		Award/A	ttainment				
<b>X</b> 7	University/	(e.g. Mas		Course/Programme	_		
Year			_	(e.g. PhD, MSc, BA,	, (e. g Econ, M Class/Grade	atiis, Sociolo	gy
n To	High School	Bachelor	rs, Degree,				
l							
	al Qualifications/Certi	ifications Ro	elevant to th	he post. (Starting fro	_		
sional/Technic		ifications Ro	Award/Atta	ninment	Specialization/Su		Class/Grade
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Year  To  nt Courses and	Institution		Award/Atta (e.g. Higher Certificate)	ninment r Diploma, Diploma,	Specialization/Su (e. g Human Res Engineering, Cou	ource,	Class/Grade
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Year  To  nt Courses and	Institution		Award/Atta (e.g. Higher Certificate)	ninment r Diploma, Diploma,	Specialization/Su (e. g Human Res Engineering, Cou	ource,	Class/Grade

Professional Bo	dy	Membership/Registration No.		Membership type Associate, Full e		Date of Renewal
IB	(D-/-1-					
Employment	t Details - v	where applicable (starting with the cu				
*7		Designation/ Position	Job G	roup/Grade	Minis	try/State Department/
Year			Gross (Ksh.)	Monthly Salary		ution/ Organization
From (dd-mm-	To (dd-mm-		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
yyyy)	yyyy)					
D. C.						
Briefly state yo	our current d	uties, responsibilities and assignments (if a	ny)			
					•••••	
		abilities, skills and experience which you co			n applie	ed for. This information may
include an outl	me or your r	nost recent achievements and your reasons	for apply	ing for this post.		

1. Full Name:	
Occupation:	
Address:	Post Code:City/Town:
Mobile No:	E-mail address:
Period for which the referee has known you:	
2. Full Name:	
Occupation:	
Address:	Post Code:City/Town:
Mobile No:	E-mail address:
Period for which the referee has known you:	
3. Full Name:	
Occupation:	
Address:	Post Code:City/Town:
	E-mail address:
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13. Declaration	
	and understand that any incorrect /misleading information may lead to
I certify that the particulars given on this form are correct	and understand that any incorrect /misleading information may lead to
I certify that the particulars given on this form are correct disqualification and/or legal action.  Date:	
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Our Tel: +254-709107100, +254 - 709107000, E-mail: info@ncpwd.go.ke, Website: www.ncpwd.go.ke