

APPLICATION FORM

“We are an Equal Opportunity Employer”

SECTION 1																																									
Post Applying for																																									
Date of Advertisement																																									
SECTION 2: PERSONAL DETAILS																																									
Surname:		First Name(s):																																							
Marital Status: Single / Married / Other		Maiden Name (if applicable)																																							
Title:		Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> National Identity Card																																							
Date of Birth		Age	Nationality																																						
Residential Address																																									
Email Address																																									
Phone number: Home		Mobile																																							
SECTION 3: QUALIFICATIONS																																									
SECONDARY ORDINARY LEVEL																																									
State whether Cambridge S. C. or Cambridge G.C.E. or London General Certificate of Education (Ordinary Level)																																									
Month / Year		Month / Year																																							
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Result.....

Aggregate.....

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SECONDARY ADVANCED LEVEL

State whether Cambridge H.S.C. or Cambridge G.C.E. or London General Certificate of Education (Advanced Level)

Month / Year			Month / Year		
Subject	Level	Grade	Subject	Level	Grade
Level – Principal, Subsidiary, Advanced Subsidiary Result.....			Level – Principal, Subsidiary, Advanced Subsidiary Result.....		

Other Qualifications (Post Graduate, Degree, Diploma, etc....)

Name of Qualification	Name of Institution & Address	Class / Division (where relevant)	Year Graduated / Awarded

SECTION 4: EMPLOYMENT HISTORY

DETAILS OF CURRENT EMPLOYMENT

Date Joined	Job Title – (Industry Sector)	Description of Duties	Name & Address of Employer	Present Salary / Month	Reason for Leaving	Period of Notice required by your employer
Experience and skills relevant to the post (Attach documentary evidence)						

DETAILS OF PREVIOUS EMPLOYMENT

From (dd-mm-yyyy)	To (dd-mm-yyyy)	Job Title –	Name & Address of Employer (Industry Sector)	Salary/Month	Reason for Leaving

Please list down the main duties performed during your employment

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SECTION 5: SUITABILITY

When completing this section, you should refer to your skills and experiences to those required in the job description. Please continue on a separate sheet if necessary.

Please outline why you feel you are a suitable candidate for this position.

Please provide relevant working examples of how your skills, experience and qualifications match the requirements of the role.

Have you applied for any other vacancies in the last 3 months?	Yes	No
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If yes, please provide details of the role/roles and when application was submitted.

Do you have any relative working at the EWF?	Yes	No
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If yes, please specify Name, Department and Relationship to Applicant.

Have you been subject to any investigation / enquiry for any offence during the last 10 years?	Yes	No
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If yes, indicate nature of offence and date of outcome.

Have you ever been prosecuted before a court of law for any offence and subsequently found guilty during the last 10 years?	Yes	No
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If yes, give details (court, charge, date of judgement and sentence – e.g. imprisonment, fine, caution or conditional discharge).

Have you ever resigned or retired or been dismissed from an organization or any grounds whatsoever?	Yes	No
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If yes, give details.

REFERENCE

Please provide name and contact details of two referees

REFEREE No 1		REFEREE No 2	
Name:		Name:	
Occupation:		Occupation:	
Address:		Address:	
Phone No:		Phone No:	
Email:		Email:	

DECLARATION BY APPLICANT

I declare that the particulars in this application, are true to the best of my knowledge and I understand that knowingly submitting false information may lead to dismissal without payment in lieu of notice, if my application is successful.

In connection with my application for employment at the Employees' Welfare Fund (EWF), I authorize the EWF to contact my former employers or any other authority or referees to provide any information relating to me to the EWF.

I am fully aware of the provisions applicable under the Data Protection Act. The purpose of the data collection is to process the application. I consent that you see, update and process the data and keep the details given to you in a database. It is mandatory to provide data, else the EWF will not process the application.

Applicant Signature

Date

This completed application form should be submitted to the General Manager, Employees' Welfare Fund, 6th Floor, Moorgate House, Sir William Newton Street, Port Louis 11328 before the closing date. Application received after the closing date will not be considered. Any incomplete application form may entail disqualification of an applicant.