

## **APPLICATION FORM**

## "We are an Equal Opportunity Employer"

SECTION 1			1							
Post Applying for										
Date of Advertis	ement									
<b>SECTION 2: PE</b>	RSONAL	DET	AILS							
Surname:					First Nar	ne(s):				
Marital Status: Single / Married /	Other					Maiden Name (if applicable)				
Title:		Mr⊑	Mr□ Miss□ Mrs □		National Card	National Identity Card				
Date of Birth			Age		National	lity				
Residential Add	ress									
Email Address										
Phone number: Home				Mobile						
Phone number:	потпе									
Phone number: <b>SECTION 3: QU</b>		TION	S							
	JALIFICA <sup>*</sup>									
SECTION 3: QU	JALIFICA DRDINAR	Y LE\	/EL	E. or London	General Cer	tificate c	of Educa	tion (Ord	inary Lev	el)
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SECTION 3: QU SECONDARY O State whether Cam	JALIFICA DRDINAR bridge S. C.	Y LE\	<b>/EL</b> nbridge G.C.			∕ear			inary Lev	
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SECONDARY ADVANCED LEVEL									
State whether Cambridge H.S.C. or Ca	_		on Gene	ral Ce	ertifica			•	,
Month / Year			Mor	th / Y	 ′ear 		I		
Subject	Level	Grade		Sı	ubje	ct		Level	Grade
	1.0.1		ļ			1.0			
	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					

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## **SECTION 4: EMPLOYMENT HISTORY DETAILS OF CURRENT EMPLOYMENT** Period of Job Title -Notice **Present Salary** Date Description Name & Address Reason for (Industry required Joined of Duties of Employer / Month Leaving Sector) 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	l qualification	s match the				
requirements of the role.						
Have you applied for any other vacancies in the last 3 months?	Yes	No				
If yes, please provide details of the role/roles and when application was subm	itted.					
	Yes	No				
Do you have any relative working at the EWF?						
If yes, please specify Name, Department and Relationship to Applicant.						
	Lv	L				
Have you been subject to any investigation / enquiry for any offence during	Yes	No				
the last 10 years?						
If yes, indicate nature of offence and date of outcome.						
Have you ever been prosecuted before a court of law for any offence and	Yes	No				
subsequently found guilty during the last 10 years?						
If yes, give details (court, charge, date of judgement and sentence – e.g. imprisonment, fine, caution or conditional discharge).						

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or any grounds		from an organiz	zation	Yes	No	
If yes, give deta	ils.					
REFERENCE						
Please provide	name and contact details of two refer	ees				
REFEREE N	0 1	REFEREE No	2			
Name:		Name:				
Occupation:		Occupation:				
Address:		Address:				
Phone No:		Phone No:				
Email:		Email:				
	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 Sign	ature	Date				

This completed application form should be submitted to the General Manager, Employees' Welfare Fund, 6<sup>th</sup> 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.

Employees' Welfare Fund, 6th Floor, Moorgate House, Sir William Newton St, Port-Louis 11328 Telephone: 208 83 53, Fax: 208 83 99

Email: <a href="mailto:empwelfund@intnet.mu">empwelfund@intnet.mu</a> Website: <a href="mailto:www.ewf.mu">www.ewf.mu</a>

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