

# EMPLOYMENT APPLICATION FORM

# **1. POST APPLIED FOR**

Title:	Code:
Organisation:	

# 2. PERSONAL INFORMATION

National Identity Number:	S	Surname:	(DR/M	r/Mrs/Ms)	Initial
Surname at Birth:	ŀ	First Names:	:		
Nationality:	Country of Bi	irth:		Date of Bir	th:
Other Nationality (nationality	of other count	tries, where a	applicab	le:	
Sex:	Postal Addres	ss:		Contact	
Male Female				Telephone	
Marital Status:				Number:	
Single Married					

# 3. EDUCATION AND TRAINING RECORD

Insert the three highest qualification/level of education completed

Level/Course:		Course Code:
Certificate Obtained:		
Subjects:		
Institute Name:	Date Entered:	Qual. Code
Address:	Date Left:	Equivalence Ref.
Level/Course:		Course Code:
Certificate Obtained:		
Subjects:		
Institute Name:	Date Entered:	Qual. Code
Address:	Date Left:	Equivalence Ref.
Level/Course:		Course Code:
Certificate Obtained:		
Subjects:		

	Date Entered:	Qual. Code
Institute Name:	//	
	Date Left:	Equivalence
Address:	//	Ref.

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# 4. LANGUAGES:

Language:	Level and Qualification (if any)	Code:
1. Creole		
2. English		
3. French		
4.		
5.		

5	DRIVING LICENSE (S)	(State types which you possess :)	Туре	
5.	DRIVING LICENSE(S)	(Sidle types which you possess.)		

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# 6. EMPLOYMENT HISTORY

Employer Name:				
Address:				
Position Occupied:		Gross Sa	lary/Year:	
From:	To:			
Reason for Leaving:				
Employer Name:				
Address:				
Position Occupied:			Gross Salary/Year:	
From:/			SR	
Reason for Leaving:				
Employer Name:				
Address:				
Position Occupied:			Gross Salary/Year:	
From: /	To://		SR	
Reason for Leaving:		-		

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**7. DESCRIPTION OF CAREER** (Please give a concise account of relevant experience and reasons for applying for this post. Use additional sheets if necessary)

8. **REFERENCES** (Give details of two persons not relatives known for two years):

Name:		
Address:		
Occupation:		
May we contact	(a) Your present employer?	(b) Your past employers?

# 9. OTHER RELEVANT PARTICULARS (Describe any special interests and hobbies)

#### **10. NEXT OF KIN**

National Identity Number:	Surname:
Contact Telephone Number:	First Names:
Address:	

# **10.1 MOTHER'S DETAILS**

National Identity Number:	Surname:
Surname at Birth (If applicable)	First Names:

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# 10.2 FATHER'S DETAILS National Identity Number: Surname: Surname at Birth (If applicable) First Names: Father's residential address (if deceased, write "Deceased)

#### **11. FAMILY**

SPOUSE:	Surname:
National Identity Number:	
Surname at Birth (If applicable)	First Names:
(Please continue under separate cover.)	
CHILD 1: National Identity Number: Surname:	CHILD 2: National Identity Number: Surname:
First Names:	First Names:
Date of Birth://	Date of Birth:/
School Attended:	School Attended:
CHILD 3: National Identity Number: Surname:	CHILD 4: National Identity Number: Surname:
First Names:	First Names:
Date of Birth:/	<b>Date of Birth:</b> //
School Attended:	School Attended:

#### **12. INTEREST IN PRIVATE BUSINESS** (Give details)

#### **13. DECLARATION** (To be completed by applicant)

The facts set forth in this application are true and complete.

Signature: \_\_\_\_\_

Date: \_\_\_/\_\_/\_\_\_

# **14. ENDORSEMENT OF PRESENT EMPLOYER** (If applicable)

Designation:	Signature:
If for any reason you should not wish to endorse this	application or if you should wish to comments, please
continue under separate cover.	