

REPUBLIC OF KENYA



COUNTY GOVERNMENT OF KILIFI

COUNTY PUBLIC SERVICE BOARD

APPLICATION FOR EMPLOYMENT FORM

Complete this form in BLOCK letters as appropriate and submit to the Secretary, Kilifi County Public Service Board. P.O BOX 491, 80108 KILIFI, KENYA.

1. Vacancy Applied For

Vacancy/Post:..... Vacancy No:.....

2. Personal Details

Name of the applicant:..... Title:.....

(e.g Prof/Dr/Mr/Mrs/Miss/Ms/Rev)

Date of Birth:..... Gender Male Female

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

Employment/PNo (for those serving in the County or National Government):.....

Address: Postal Code:.....

County:..... Sub County:..... Ward:.....

Telephone:..... Mobile:..... Email address:.....

Alternative contact person:.....Telephone:.....

3. Other Details

Do you suffer from any physical impairment? (PWD) Yes No

If yes give details:.....

6. Employment Details (starting with the most recent)

Duration		Employers Name	Position/Rank/ Designation	Job Group/Gross Monthly Salary (Kshs)
From	To			

7. Briefly state your current duties, responsibilities and assignments

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8. Please give details of your abilities, skills and experience which you consider are relevant to the position applied for. The information may include an outline of your most recent achievements and your reasons for applying

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9. Personal Referees

1. Full Name:.....
 Address:.....
 Telephone No:..... Email address:.....
 Occupation:.....
 Period for which he/she has known you:.....
2. Full Name:.....
 Address:.....
 Telephone No:..... Email address:.....
 Occupation:.....
 Period for which he/she has known you:.....

3. Full Name:.....
Address:.....
Telephone No:..... Email address:.....
Occupation:.....
Period for which he/she has known you:.....

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/legal action.

Date:
(dd-mm-yyyy)

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Signature of the Applicant