

COUNTY GOVERNMENT OF UASIN GISHU



APPLICATION FOR EMPLOYMENT FORM

Please complete all sections of this form as appropriate in **BLOCK** letters and submit together with your application

1. Vacancy Applied For

Vacancy:

Department:

2. Personal Details of the Applicant:

Name..... Title:.....
(Surname) (First Name) (Other Names) (Prof/Dr/Mr/Mrs/Miss/Ms/Rev)

Date of Birth:..... ID NO.
(dd-mm-yyyy)

PIN No. Gender: Male Female

Nationality:..... Ethnicity..... Home County:

Sub-County:..... Ward:..... Location:.....

Sub-Location..... Village:

Postal Address: Code: Town/City

Mobile No. E-Mail Address.....

Name of alternative contact person: Tel. No.

Are you living with a disability? Yes No If yes give :

(i) Details/Nature of Disability.....

(ii) NCPD Membership (Reg. No. and Date).....

3. Academic Qualifications (Starting with the highest)

Year		University/High School	Award/Attainment (e.g. Masters, Bchechors, Degree, KCSE)	Course/Programme (e.g. Phd,MSc,,BA, O' level)	Specialization/subject (e.g. Econ,Maths, Sociology etc)	Class/Grade
From	To					

4. Professional/Technical Qualifications/Certificates Relevant to the post (Starting with the Highest)

Year		Institution	Award/Attainment (e.g Diploma, Certificate)	Specialization/subject (e.g. Human Resource, Engineering, etc)	Class/Grade
From	To				

5. Current Registration/Membership to Professional Bodies

Professional Body	Membership/Registration No	Membership Type (e.g. Associate, Full etc)	Date of Renewal

6. Employment Details – Where applicable (starting with the current or most recent)

Year		Designation/Position	Job Group/ Scale	Ministry/State Department/Institution/Organization
From (dd-mm-yyyy)	To (dd-mm-yyyy)			

7. Declaration

I certify that the particulars given on this form are correct and understand that any incorrect/misleading information may lead to disqualification and or legal action.

Date:

.....

(dd-mm-yyyy)

Signature of the Applicant