	MINISTRY OF EDUCATION, TERTIARY EDUCATION, SCIENCE AND TECHNOLOGY MITD HOUSE, PHOENIX
	Application for the Post of Driver
Se	<u>ction A</u>
1.	Title: Mr Mrs Image: Miss Image: Tick as appropriate)
	Surname: (in block letters)
	Other Names: (in block letters)
	Maiden Name (if applicable):
2	Date of Birth: National Identity Card No.:
3	Residential Address: (in block letters)
4.	Home Telephone No
5.	Date joined Government Service:
6.	Date transferred to the Permanent and Pensionable Establishment: (PPE) and in what grade:
7.	(i) Present Post held:
	(ii) Whether casual/temporary/substantive:
8.	Date of appointment to present Grade/Post:
9.	Posting : (i) Ministry/Department:
	(ii) Site of Work/School/Section/Division/Unit:
10.	. Present Salary (basic):

11. Previous appointment held in Government Service and in what grade/capacity:

Appointment	From	То	Ministry/Department

12. Qualifications:

1.

2. 3.

4.

5. 6.

7.

8.

(a)	Detailed results					
	Certificate of Primary Education	ation and Year				
	Subject	Grade				
	English					
	French					
	Maths					
	Geography/EVS					
	Oriental Language ()				
(b)	Detailed results of Cambridge School Certificate		Detailed results of London General Certificate of Education (Ordinary Level)			
Year	Examination Centre No. Inc	lex No. Year Examination Cen	tre No. Index No.			
•••••	•••••		••••••			
Subje	ct Grade	Subject	Grade			

13.	Any other Qualifications:
14.	Experience relevant to the post of Driver (Attach documentary evidence)
15. (a)	Have you ever been prosecuted before a court of law for any offence and subsequently found guilty? (If yes, give Details)
(b)	Have you ever been dismissed or retired from the Public Service on any grounds whatsoever? (If yes, give details)
16.	IMPORTANT – PLEASE READ THE ADVERTISEMENT CAREFULLY:

Incomplete, inadequate or inaccurate filling of the form may cause the applicant's elimination from consideration. It is an offence to give false information or to conceal any relevant information. This may lead to an application being rejected or, if a candidate has already been appointed, to the termination of his appointment.

DECLARATION

I, ________ the undersigned applicant, declare that the particulars in this application form and in the sheets thereto, are true and accurate to the best of my knowledge and belief and that I have not willfully suppressed any material facts.

Date:

Signature of Applicant

Section B

<u>To be filled by Head of School or Head of Division/Section/Unit of Ministry/Department (as applicable) where applicant is posted</u>		
(i)	Record of Sick Leave 2017: days 2018: days 2019: days 2020: (up to date) days	
(ii)	<u>Report on</u> : Conduct	
	Work	
	Attendance	
(iii)	Whether officer has ever been assigned duties of Driver (Yes/No)	
	(In the affirmative, please specify period of assignment):	
	Signature:	
	Name (in full):	
	Designation:	
	Date:	
	Office Phone No: : (specify School/Division/Section/Unit) :	

Section C

<u>To be filled by Human Resource Division of Ministry/ Department/Education Zone (as applicable)</u> where applicant is posted.

- (i) Whether officer has been subject to disciplinary action for the past ten years: (in the affirmative, please give details)
- (ii) I certify that particulars at Sections A, B and C (i) are correct.

Signature:
Name (in full):
Designation:
Date:
Office Phone No:

Seal of Ministry/Department/ Education Zone