MINISTRY OF EDUCATION, TERTIARY EDUCATION, SCIENCE AND TECHNOLOGY MITD HOUSE, PHOENIX

Application for Post of School Caretaker

Section A (To be filled in by Applicant)

1.	1. Title: Mr □ Mrs □ Miss □ (Tick as appropriate)			
	Surname: (in block letters)			
	Other Names: (in block letters)			
	Maiden Name (if applicable):			
2.	2. Date of Birth: National Identity Card No.:			
3.	Residential Address:			
4.	4. Home Telephone No: Mobile No:Office Telephone No			
5.	5. Date joined Government Service:			
6. gra	6. Date transferred to the Permanent and Pensionable Establishment: (PPE) a grade:			
7.	(i) Present Post held:			
8.	Date of appointment to present Grade/Post:			
9.	Posting: (i) Ministry/Department:			
10.	10. Present Salary (basic):	Present Salary (basic):		
11.	11. Previous appointment held in Government Service and in what grade/ca	apacity:		
	Appointment From To Ministry/Depa	rtment		

(a) **Detailed results** Certificate of Primary Education and Year Subject Grade English French Maths Geography/EVS Oriental Language (.....) **Detailed results of Cambridge Detailed results of London General** (b) **School Certificate Certificate of Education (Ordinary Level)** Year Examination Centre No. Index No. Year Examination Centre No. Index No. Subject Grade Subject Grade 1. 2. 3. •••••• 4. 5. •••••• 6. •••••• 13. Any other Qualifications: Experience relevant to the post applied for (Attach documentary evidence) 14. 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)

Qualifications:

12.

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 under	signed applicant, declare that		
the p	particulars in this application form and in the sheets thereto of my knowledge and belief and that I have not willfully sup	, are true and accurate to the		
Date:		ature of Applicant		
Section	on B			
To be	e filled by Head of School or Head of Division/Section/Unit where a	applicant is posted		
(i)	Record of Sick Leave 2020:days 2021:days 2022:days 2022:days			
(ii)	Report on:			
	Conduct			
	Work			
	Attendance			
(iii)	Whether officer has ever been assigned duties of School Caretaker (Yes/No)			
	(In the affirmative, please specify period of assignment):			
Signa	ture:	0.1.401.1/0.11		
Name (in full):		Seal of School/Division		
Designation:				
Date:				
Office	e Phone No			
Section	on C			
To be	e filled by Human Resource Division of Zone/Section where application	ant is posted.		
(i) Whether officer has been subject to disciplinary action for the past ten years: (in the affirmative,				
p	lease give details)			
(ii) I	certify that particulars at Sections A, B and C (i) are correct.			
Signa	ture of Officer:			
Name (in full): Seal of Human Resource				
Desig	gnation:	Section		
Date				