



**Government of the Commonwealth of Dominica
Establishment, Personnel and Training Department**

Application for Employment Form

PERSONAL INFORMATION

Name:

Last

First

Middle

Maiden

Title: Ms. Mr. Mrs. Dr. (other specify)

Date of Birth: Day Month Year **Social Security Number**

Present Address:

Contact Numbers:

Email Address:

EDUCATION: (certified copies of all certificates to be provided)

Type of School	Names of School	Dates Attended from – to	Location	Certificate/Diploma Degree Earned

Professional Certifications and Training

QUALIFICATIONS OBTAINED: (certified copies of all certificates to be provided)

ORDINARY LEVEL (GCE OR CXC)

<u>Subject</u>	<u>Grade (basic or General)</u>	<u>Year</u>
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ADVANCED LEVEL (GCE)

<u>Subject</u>	<u>Grade</u>	<u>Year</u>
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DOMINICA STATE COLLEGE (ASSOCIATE DEGREE)

EMPLOYMENT HISTORY:

Current Employer:

Brief Description of duties

Previous Employers and Brief Description of Duties:

BACKGROUND INFORMATION:

Please provide the name and address of references:

I certify that the information contained in this application and any attachment is true and complete. I understand that any wilful misrepresentation, false statement or omission by me in this application will be cause for rejection of my application or termination of my employment. I authorize investigations to verify all information provided in this application and any attachment and I release all persons and organizations from liability for providing or receiving information. I further understand that this is just an application for employment and not an employment contract.

APPLICANT'S SIGNATURE

DATE

**COMPLETED FORMS SHOULD BE
RETURNED TO:**

The Chief Personnel Officer
Establishment, Personnel and Training Department
Government Headquarters
Roseau
Commonwealth of Dominica

Tel: (767) 266 3274
Fax: (767) 448 5044
E-mail address: establishment@dominica.gov.dm