

GOVERNMENT OF SAINT LUCIA

**EMPLOYMENT APPLICATION**

- Important:
1. All sections of this form must be completed.
  2. Print all responses clearly.
  3. Originals or Certified Copies of Academic, Professional and Technical Certificates must be submitted with this form.
  4. Two completed Referee Forms in sealed envelopes must be submitted with this form.
  5. For Public Service Personnel Performance Appraisals Forms must be submitted with this form which must be submitted through the Permanent Secretary.
  6. A completed Physical Examination Certificate must be submitted with this form (except for permanent Public Service Personnel).

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POST TITLE ..... POST NUMBER .....

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SECTION A – PERSONAL INFORMATION

1. Name (*Last, First, Middle*) .....
2. Maiden Name ..... 3. Date of Birth .....  
(*Year/Month/Day*)
4. Age Last Birthday ..... 5. Nationality .....
6. Place of Birth ..... 7. Father's/Mother's Nationality .....
8. Marital Status ..... 9. Number of Children ..... 10. Sex .....
11. Civil Service Staff No. .... 12. NIS No. ....
13. Correspondence Address .....
14. Home Address (*if different*) .....
15. Telephone No. (*Home*) ..... 16. Telephone No. (*Work*) .....
17. Next of Kin (Name, Address and Telephone No.) .....  
.....

SECTION B – EDUCATION RECORD

Educational Institutions	Address	Date		Qualifications obtained, if any, listing Subjects and Grades
		From	To	
18.				
19.				
20.				
21.				
22.				
23.				

**SECTION C – EMPLOYMENT EXPERIENCE**  
(Details of most recent employment must be provided first)

24. Name of Firm ..... Employed From ..... To .....  
Address ..... Title of Post .....  
Reason for Leaving ..... Salary .....

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25. Name of Firm ..... Employed From ..... To .....  
Address ..... Title of Post .....  
Reason for Leaving ..... Salary .....

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26. Name of Firm ..... Employed From ..... To .....  
Address ..... Title of Post .....  
Reason for Leaving ..... Salary .....

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27. Name of Firm ..... Employed From ..... To .....  
Address ..... Title of Post .....  
Reason for Leaving ..... Salary .....

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**SECTION D – REFERENCES**  
(Referees must not be Former Employers or Relatives)

28. Name ..... Address ..... Telephone No. ....  
29. Name ..... Address ..... Telephone No. ....

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**SECTION E – OTHER QUALIFICATIONS**  
(Membership in Professional Organisations, Professional or Technical Qualifications)

30. ....  
31. ....  
32. ....  
33. ....

**SECTION F – SPECIAL QUALIFICATIONS**  
(e.g. typing, Shorthand, Computer Proficiency)

- 34. ....
- 35. ....
- 36. ....
- 37. ....

**SECTION G – COMMUNITY AND SOCIAL ACTIVITIES**  
(Provide details of your Community, Social or Sporting involvements)

- 38. ....
- 39. ....
- 40. ....
- 41. ....
- 42. ....
- 43. ....
- 44. ....
- 45. ....

**SECTION H – LIST OF DOCUMENTS ATTACHED**  
(Please indicate the documents which you have attached)

- |          |          |
|----------|----------|
| 46. .... | 47. .... |
| 48. .... | 49. .... |
| 50. .... | 51. .... |
| 52. .... | 53. .... |

Application forms which have not been fully completed and forms not accompanied by original or certified copies of certificates and other required documentation will not be considered.

.....  
Signature of Applicant

.....  
Date

## Referee Form

NAME OF APPLICANT ..... DATE .....

TITLE OF POST/TRAINING COURSE APPLIED FOR .....

POST/TRAINING COURSE NO. ....

N.B. This form must be completed confidentially by the Referee and returned to the applicant in a sealed envelope with the referee's signature across the seal.

**Please enter an X in the appropriate column to indicate your assessment of the applicant's capabilities.**

Demonstrated Ability for Learning

Academic Potential

Ability to Express Himself/Herself: Orally

In Writing

Initiative

Perseverance

Ability to Work Independently

Ability to get on with Colleagues/within a Team

Ability to get on with Instructors/Persons in Authority

Potential of this Applicant for Performing Effectively

Potential of this Applicant for Self Development and Advancement

Outstanding	Above Average	Average	Below Average	Not Known

**Further Comments:**

.....  
Signature

.....  
Name (Type or Print)

.....  
Position

.....  
Address

.....  
Telephone No.